

AN OWNER'S GUIDE

FOR A

CONTRACTOR

HEALTH AND SAFETY

MANAGEMENT PROGRAM

February 1997

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FOREWORD

This document is intended as an Owner's Guide for contractor health and safety requirements. It addresses the health and safety elements of a management system for a contractor. It does not address other important elements of a management system, such as environmental compliance, project management, and quality control.

Any contractor health and safety management program should conform to the requirements identified in this document. However, it is necessary to assess the contractor's commitment to health and safety at every stage of the work because, without commitment, health and safety are inevitably jeopardized.

This document has been prepared by the Construction Owners' Association of Alberta for use in Alberta. However, in its use consideration must be given to the interpretation of the Alberta Occupational Health and Safety Act. It is based on a similar document prepared by the American Petroleum Institute (API) and the Chemical Manufacturing Association (CMA).

This document is an Owner's Guide and, as such, must be supplemented with the specific local considerations applicable to each contract.

Suggestions to improve the Owner's Guide are invited. They should be submitted to the Construction Owners' Association of Alberta, Suite 1410, Oxford Tower, 10235 - 101 Street, Edmonton, Alberta, T5J 3G1. The telephone number is 403-420-1145, and the FAX number is 403-425-4623.

1.0 INTRODUCTION

Many construction owners employ contract personnel for a wide range of activities, from administrative support to construction, equipment repair, and maintenance. Some contractor's activities, because they involve work around or in equipment handling hazardous materials, have the potential to place either a contractor's and/or a company's personnel at risk from releases of hazardous materials.

With the continued use of contractors (and in some cases increased contractor involvement), it becomes important for effective management systems to be in place to minimize the potential for safety incidents to occur.

1.1 THE OBJECTIVE

The objective of this document is to improve the work place health and safety by assisting an owner in designing and creating a contractor health and safety management program, and assisting a contractor in developing a program consistent with an owner's expectations. This program should be designed to protect both an owner's and a contractor's personnel from work place injury and illness, as well as from losses associated with incidents arising out of a contractor's work at a facility.

A contractor will benefit from understanding an owner's requirements, and establishing a complimentary program of his/her own.

1.2 THE BENEFITS OF A CONTRACTOR HEALTH AND SAFETY MANAGEMENT PROGRAM

All owners and contractors benefit when they work together to enhance the management of a contractor-related health and safety management program. These benefits may include:

- A better working relationship between an owner and a contractor.
- Improved competitiveness.
- Improved contractor productivity.
- Improved plant reliability.
- Improved safety performance.
- Improved training for both an owner and a contractor.
- Increased safety and well-being of all personnel.

1.3 A CONTRACTOR/OWNER RELATIONSHIP

This guide is intended to assist an owner and a contractor in designing and creating a mutually beneficial contractor health and safety management program, while preserving the independent contractor's relationship, and ensuring appropriate contract terms and conditions, and indemnity. In particular, the appendixes provide sample elements of a contractor health and safety management program.

An effective contractor health and safety management program requires participation by both an owner and a contractor, each of whom has a distinct role to play in ensuring the ongoing safety of a contractor's activities. An owner/contractor relationship is significantly improved by clearly defining the roles and responsibilities of both parties, defining expectations, and maintaining communication throughout the relationship.

A subcontractor is frequently used by a contractor, especially on larger projects or for a specialized portion of the work. A subcontractor will be subject to an owner's and/or a contractor's health and safety requirements, depending on the nature of the contract. The major difference is that a contractor who employs a subcontractor is also in the position of an "owner" with respect to a subcontractor.

The contractor should verify a subcontractor follows the appropriate health and safety requirements. An owner and a prime contractor should discuss and agree on a contractor health and safety management program requirements for a subcontractor during the preaward process.

1.4 A CONTRACTOR

This Owner's Guide was created to assist an owner in developing and implementing a contractor health and safety management program. The information contained in this document may benefit both an owner and a contractor. In particular, the appendixes provide an attempt to standardize the elements of a contractor health and safety management program. The potential benefits of standardization for an owner and a contractor may include:

- A better working relationship between an owner and a contractor.
- Improved safety performance.
- Reduced time to collect and review the prequalification form.
- Reduced training for both an owner and a contractor.
- Reduction in an owner's overlays in a contractor health and safety management program.

1.5 A SUBCONTRACTOR

A subcontractor is frequently used by a contractor, especially on larger projects or for a specialized portion of the work. A subcontractor has a contractual relationship with a contractor. A subcontractor should comply with a contractor's health and safety management program, which, in turn, complies with an owner's contractor health and safety management program.

The major difference in this process is that a contractor is in the position of being an "owner." In this position, a contractor should undertake the responsibilities and actions of an "owner," as outlined in this document. A subcontractor should follow a contractor's requirements, as addressed in this document.

An owner should verify a contractor is following an owner's or a contractor's health and safety management program for a subcontractor involved in the work. An owner and a contractor should discuss and agree on a contractor's health and safety management program requirements for a subcontractor during the preaward process.

1.6 DEFINITIONS

Owner.

Contractor.

Long-Term Contractor.

Short-Term Contractor.

Small Contractor.

Subcontractor: For the purposes of this document, the term contractor and subcontractor are synonymous.

Green Field Construction.

Overlay.

Root Cause.

2.0 THE SCOPE AND THE APPLICATION

2.1 THE SCOPE

This Owner's Guide has been developed to assist construction owners and the contractors who perform work for them. The concepts within this Owner's Guide may benefit other industry segments, even though it was not specifically developed for them. These concepts do not necessarily apply to contractors who are not located at an owner's facility, nor to outside suppliers. This Owner's Guide may be applicable to all contractors, including subcontractors who are retained by a contractor.

2.2 THE MANAGEMENT OVERVIEW

An owner's comprehensive health and safety management program should contain the following elements:

- **Performance Evaluation**
Evaluates a contractor's health and safety management program.
- **Prejob Activities**
Determines the final aspects before the work begins.
- **Prequalification of a Contractor**
Prequalifies a contractor for work at a facility.
- **Selection of a Contractor**
Determines if a contractor is qualified for the work, and if he/she understands the scope of the work.
- **Work in Progress**
Tracks an owner's and a contractor's activities while the work is being conducted.
This includes the periodic evaluation of the emergency response and the performance requirements.

These key elements, and other subelements, are best illustrated by Figure 2-1, on page four. Each key and subelement correspond to the structure of this guide. It is important to note the process depicted in Figure 2-1 includes decision points, which provide a feedback mechanism that allows for continuous improvement of a contractor's health and safety management program.

2.3 GETTING STARTED

The question, "Where do I begin?" is often asked. For a new contractor, the answer is relatively obvious--at "Prequalification." However, for an existing contractor working at the facility, the suggested starting point is "Work in Progress." Figure 2-1 clearly identifies the starting points for both a new and an existing contractor.

An owner should review the remainder of the Owner's Guide for a basic understanding of the contents of a contractor's health and safety management program. The next step is to determine the appropriate level of risk and the components of the program, as discussed in Section 2.4. Finally, an owner should address the material in Section 8.0, **PUTTING IT ALL TOGETHER**.

2.4 THE LEVEL OF RISK ASSOCIATED WITH A CONTRACTOR'S WORK

The risk of injury or illness to the employees of an owner and a contractor is an important consideration in determining how to apply the components of a contractor health and safety management program. For example, an administrative support person, employed through an agency providing temporary clerical support, is not normally directly exposed to process hazards. This type of contractor's work would normally be classified as "low risk." On the other hand, a maintenance worker performing work around process equipment could be exposed to a release of hazardous materials, or could even cause the release to occur. If so, this type of contractor's work would normally be classified as "high risk."

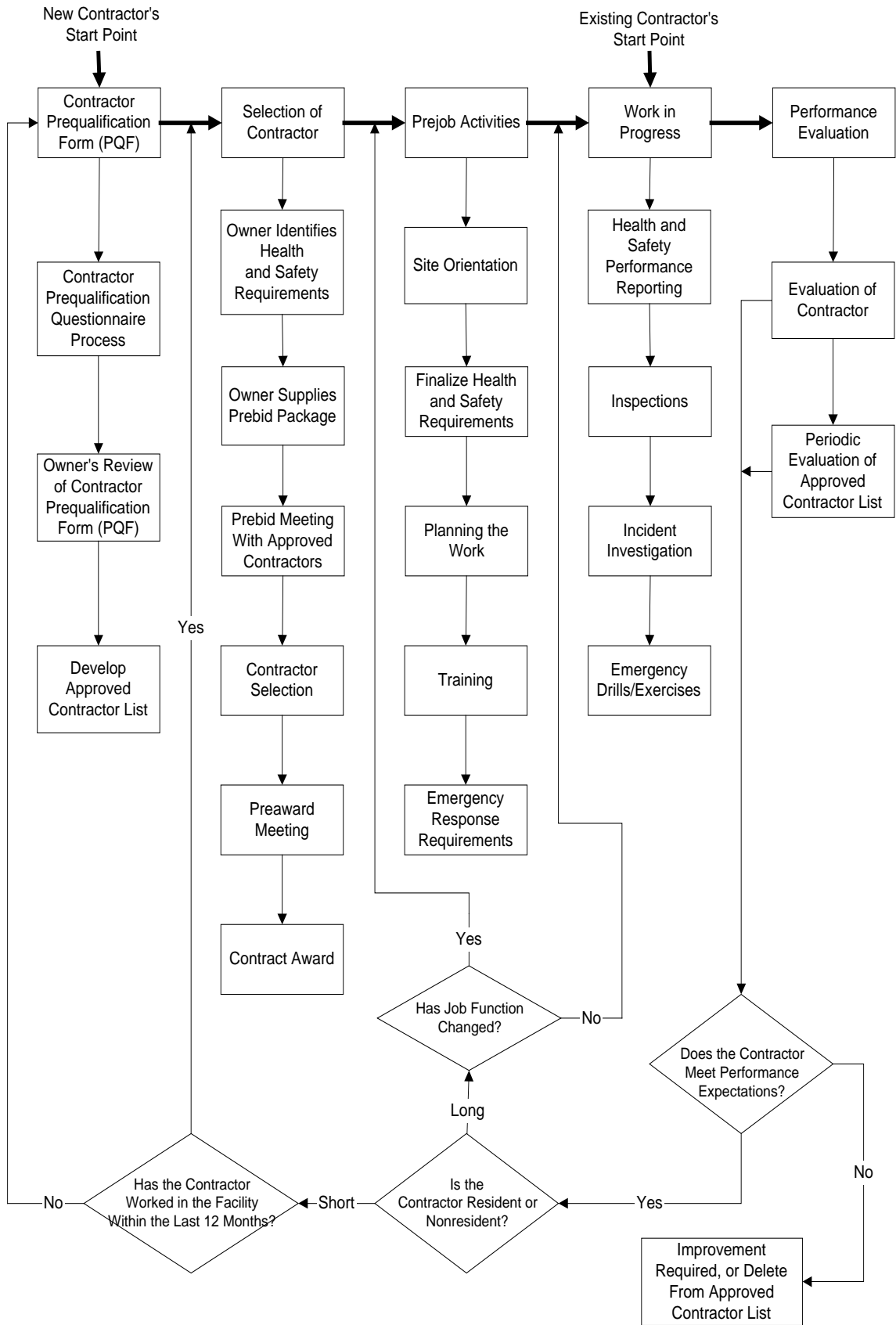


Figure 2-1. Contractor Health and Safety Management Process Overview

A contractor health and safety management program should be designed to reflect the different relative levels of risk associated with the work to be performed. Factors to consider may include the:

- Contractor's experience and expertise in performing similar type work.
- Duration of the work to be performed.
- Location of the work to be performed.
- Nature of the work to be performed.
- Potential for a contractor performing the work to expose himself/herself, other contractors, or an owner's employees, to hazards.
- Potential for exposure to work site hazards.

Each contractor should be reviewed and evaluated to determine the appropriate level of risk for the type of work to be performed.

This section outlines one approach to classifying levels of risk. This approach is summarized in Tables 2-1 and 2-2, on pages seven and eight. The development of these tables is described in the following sections. An owner may use this approach or develop his/her own plan.

2.4.1 The Typical Types of Work

A typical contractor's work functions can be divided into six general categories:

- 1. Operational, Maintenance, and Construction Personnel in Process Units**
A contractor performing construction, equipment maintenance, or process operations in active process units.
- 2. Operation Support**
A specialty contractor, providing specific nonmaintenance service to operations.
- 3. Distribution**
An on site contractor, providing support or services specifically related to the on site distribution and handling of products and materials, nonprocess related equipment, maintenance, and management of distribution.
- 4. Technical/Administration**
A contractor providing clerical skills or technical expertise and knowledge in support of plant and business units.
- 5. Site Services**
A contractor providing general services for the site.
- 6. Construction - Green Field**
An on site contractor, performing traditional construction with no hazardous materials in systems.

The level of risk for categories may be calculated by completing Table 2-1. The relative level of risk should be categorized as low (L), medium (M), or high (H). The relative level of risk is influenced by two factors. These factors are:

- **Personnel Health and Safety Risk**
Those health and safety hazards normally associated with the work, for example, working in elevated areas with fall potential, heat stress, noise exposure, tripping hazards, etc.
- **Process Safety Impact**
Those hazards in a process that may affect an owner's or a contractor's employees, such as explosion, fire, and toxic release. Additional hazards may exist simply because of the work location, for example, work in a process unit as opposed to work in the open away from hazardous materials.

An owner should determine the appropriate level of risk for his/her personnel's health and safety and process safety impact. The relative level of risk is then determined by:

Process Health and Safety	Process Safety Impact	Relative Level of Risk
High/Medium/Low	High	High
High	Medium/Low	High
Medium/Low	Medium	Medium
Low	Low	Low

Table 2-1 represents an intermediate stepping stone to Table 2-2. It is included to show the logic used in the development of Table 2-2, and is provided for informational use.

Examples of relative risk levels are:

- a) A contract company is retained to do abrasive blasting and painting. The work could be either high, medium, or low for health and safety impact, depending on the methods employed. If the work is to be conducted on a process unit while in operation, the process safety impact will be high. If the work is to be conducted in a designated area away from the process, the process safety impact is low. Therefore, depending on the factors involved, the relative level of risk would be one of high, medium, or low.
- b) An administrative person would generally have low health and safety impact. The process safety impact would generally be low if working in buildings away from the process, or high if working in a building near or in the process. Again, the relative risk would be high, medium, or low.

2.4.2 The Suggested Components of a Contractor Health and Safety Management Program for Each Level of Risk

The relative level of risk for the proposed work by a contractor will affect the depth of involvement in a contractor's health and safety management program. Table 2-2 provides the generally expected components of a contractor's health and safety management program which can be applied to each type of contractor's work, based on the level of risk.

2.5 A NONRESIDENT CONTRACTOR AND A SMALL CONTRACTOR

2.5.1 A Nonresident Contractor

A contractor may be on site for the short term (a nonresident contractor) or the long term (a resident contractor), based on the nature of the job being performed. Therefore, the depth and breadth of a contractor's health and safety management program will vary.

For example, a catalyst exchange operation may be performed by a nonresident contractor in three days. This type of work may involve a high level of risk because the work is conducted in a confined space, with limited oxygen available, and because a catalyst that is pyrophoric and toxic is being used. Although a nonresident contractor will only be at the facility for a short time, the level of risk would probably require him/her to meet the same level of a contractor's health and safety requirements as a resident contractor.

On the other hand, a contractor performing low risk, nonresident contract work, such as a lawn service contractor, may not require as comprehensive a contractor health and safety management program as a resident contractor performing other low-risk work. The exposure of a nonresident contractor to potential hazards is over a much shorter duration of time, thus reducing the level of risk.

2.5.2 A Small Contractor

A small contractor may not be able to meet the requirements of an owner's health and safety management program. An owner should be aware of this and reach agreement with a small contractor on an appropriate means of meeting an owner's health and safety management program requirements.

Table 2-1. A Typical Contractor's Risk Levels by Function

Type of Work	Examples (Is Not All Inclusive)	Personnel Health and Safety Risk	Process Safety Impact	Relative Risk Level
Construction, Maintenance, and Operational Personnel in Process Units	Abrasive Blasting Coatings Electrical Heavy Equipment Operations Hot Bolting Hot Tapping Instrumentation Insulation Leak Repair Mechanical (Millwrights, Pipe Fitters, Riggers) Operators Safety and Fire Protection Systems Scaffolding Vacuum Truck Operations Welders			
Operation Support	Asbestos and Lead Abatement Catalyst Exchange Chemical Cleaning Container Cleaning (Barge, Drums, Rail Car, Truck) Container Movement Dismantling Diving Environmental Services Laboratory Technicians Product Handlers (Operators) Remediation Testing and Inspection Waste Disposal Water Blasting			
Distribution	Independent Gaugers Rail Repair/Construction Vessel Operators			
Administration/ Technical	Clerical (Unless Located in Process Units) Computer Support Engineer Support Medical Services Technical Consultants			
Site Services	Communications Equipment In-Plant Drivers Lawn Service Nonprocess Electrical Office Equipment Repair Security Vehicle Mechanics			
Construction - Green Field	Boiler Construction Building Construction Cranes and Lifting Equipment Demolition Electrical Excavation and Earthwork General Contractors Masonry Mechanical Painting Steel Erection Vessel Construction Welding			

Table 2-2. A Contractor Category, and a Typical Contractor Health and Safety

Management Program Elements

Contractor's Health and Safety Management Program Element	Construction, Maintenance, and Operational Personnel in Process Units	Operation Support	Distribution	Adminis-tration/ Technical	Site Services	Construction - Green Field
Prequalification	X	X	X			X
Listing on the Approved Contractor List	X	X	X	X		X
Identify Health and Safety Requirements	X	X	X			X
Health and Safety Requirements in the Bid Package	X	X	X		X	X
Prebid Meeting	X	X				X
Preaward Meeting	X					X
Identify Required Training	X	X	X	X	X	X
Review a Contractor's Health and Safety Management Program	X	X				X
Need to Verify a Contractor Can Comply	X	X	X			X
Site visit by a Contractor	X	X				X
Identify the Communication Requirements	X	X	X			X
Compliance With the Equipment Requirements	X	X	X			X
Verify the Training of a Contractor's Supervisors	X					X
Emergency Response Involvement	X	X	X	X	X	X
Statistical Reporting	X	X	X	X	X	X
Owner's Health and Safety Inspection	X	X	X			X
Contractor's Health and Safety Inspection	X	X	X			X
Incident Investigation	X	X	X	X	X	X
Owner's Evaluation of a Contractor	X	X	X	X	X	X

3.0 A CONTRACTOR'S PREQUALIFICATION

Generally, prequalification should be the initial task undertaken by an owner to formally evaluate a new contractor who has not worked in the facility for the last 12 months.

It is important for an owner to prequalify a contractor who works at a facility. Prequalification is recommended for a contractor for on site work which may expose his/her employees, other contractors, a contractor's employees, an owner's employees, or the community to reasonably foreseeable health and safety hazards. This would be determined by the level of risk assessed. Table 2-2, on page eight, provides guidance on the type of work which might require prequalification. Prequalification evaluates a prospective contractor's ability to meet minimum health and safety performance criteria.

Figure 3.1, on page 10, a Contractor Prequalification Flowchart, illustrates the process an owner would go through to implement a prequalification system for a contractor. Two boxes on the flowchart may require clarification. The first box asks the question "Does the level of the risk associated with the type of work warrant prequalification?" This box refers to the discussion in Section 2.4 on the relative levels of risk to a contractor, based on the type of work being performed. Section 2.4 provides guidance to an owner on the level of risk, and how it may affect prequalification.

The second box asks the question, "Do a contractor's safety qualifications meet an owner's criteria?" This means an owner must develop criteria to determine if a contractor's health and safety management program and performance are acceptable to an owner, based on the information provided. Additional discussion on acceptance criteria is contained in Section 3.2.2.

In some cases, a contractor may not be able to meet an owner's health and safety criteria because he/she is small or may be the only contractor available within reason. The flowchart suggests an option for an owner to provide conditional acceptance of such a contractor. This conditional acceptance should have a specific time period and additional requirements/administrative controls deemed necessary for the relative level of risk for the work to be performed. A contractor, if he/she uses a subcontractor, should establish a prequalification system for a subcontractor.

3.1 A CONTRACTOR PREQUALIFICATION FORM (PQF)

An owner should utilize a completed contractor prequalification form (PQF) to determine a contractor's health and safety qualifications for the performance of the work at a facility. The primary purpose of the contractor's PQF is to obtain and evaluate information about a prospective contractor, to determine if his/her health and safety management program and past health and safety performance are acceptable, and to comply with an owner's criteria. A sample of a contractor PQF is provided in Appendix A.

A contractor PQF prompts a contractor to provide most of the information necessary for an owner to complete an evaluation of a contractor's health and safety management program and past health and safety performance. Major sections of a contractor PQF, and the purpose of each section, include:

- **General**
Provides basic information on the company, location, and contacts.
- **Health and Safety**
Identifies a contractor's health and safety management program and policies.
- **Health and Safety Orientation Program**
Identifies the type of training given to a new contractor's employees and supervisors on health and safety issues.
- **Health and Safety Staff**
Provides information on health and safety staff available to support a contractor, the health and safety support structure, and the reporting relationships.

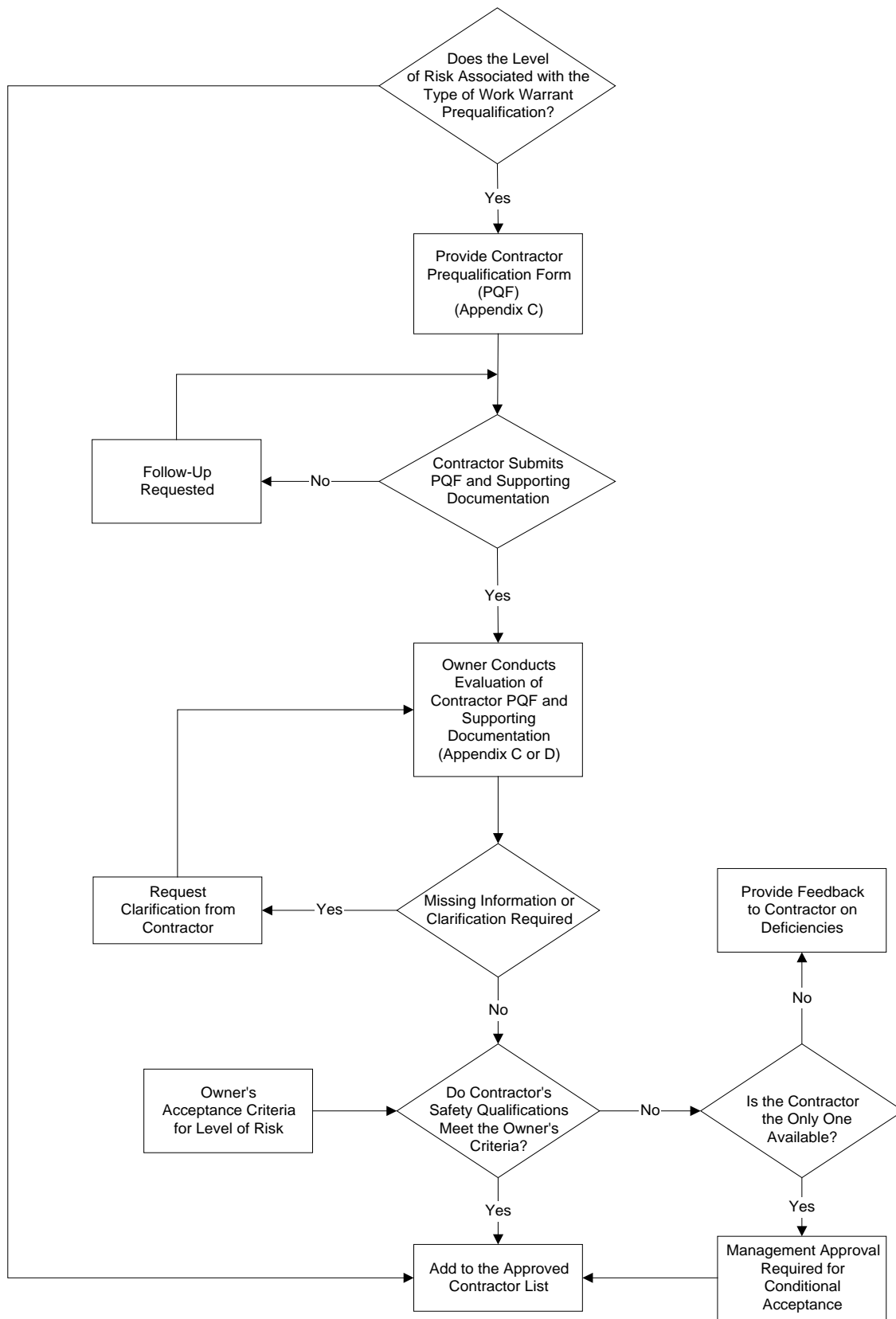


Figure 3-1. Contractor Prequalification Flowchart

- **Inspections**
Identifies the type and frequency of a contractor's inspections and incident investigation procedures.
- **Legal**
Provides information on outstanding or past liabilities, including recent citations.
- **Medical**
Provides information on the physical examinations required and the medical support available while on site, including the first aid and emergency procedures.
- **Organization**
Provides basic financial information, services performed, and work subcontracted.
- **Performance**
Provides information on a contractor's past health and safety performance by requesting data from the past three years for fatalities, illnesses, injuries, lost work days, and workers' compensation experience.
- **Substance Abuse**
Provides information on a contractor's substance abuse program.
- **Work History**
Identifies both the current and the previous job history for the specific types of work that will take place.

A sample covering letter for a contractor's PQF is included in Appendix B. This covering letter should state an owner's minimum requirements for acceptance to an owner's approved contractors list.

3.2 AN OWNER'S REVIEW OF A CONTRACTOR'S PREQUALIFICATION

An owner should establish a method for reviewing and determining if a contractor has met an owner's health and safety management program.

3.2.1 The Review of a Contractor's Prequalification Form (PQF)

A completed contractor's PQF should be examined for completeness, and reviewed and evaluated against an owner's written acceptance criteria. The evaluation of the data on a contractor's PQF and the additional material submitted should be completed by knowledgeable individuals, familiar with health and safety data.

Appendix C provides a sample method for evaluating the information submitted by a contractor. This method is a simple evaluation to determine if the provided information is acceptable or if improvement is needed. This method is subjective, and is based solely on the reviewer's opinion. The people involved in the review should be knowledgeable in health and safety requirements.

During the completion of a contractor's PQF, the question often arises regarding the amount of documentation required for submittal. Some owners are interested in determining whether a contractor has the key elements or all the elements as part of his/her health and safety management program. Other owners want to review the entire health and safety management program to determine the level of detail and completeness of the health and safety management program. An owner should identify which supporting material should be included with a contractor's PQF.

An owner should provide feedback to a contractor on areas that need improvement in order to assist a contractor to improve his/her health and safety management program. This may enable a contractor to meet an owner's acceptance criteria at a later date. In fact, an owner may wish to review the form with a contractor in order to:

1. Provide feedback to a contractor.
2. Validate an owner's interpretation of the results.
3. Follow up on deficiencies.

3.2.2 **The Acceptance Criteria**

The next step is to establish the appropriate acceptance criteria. An owner should establish the acceptance criteria for the type of work being performed (as described in Section 2.4). Typical acceptance criteria should include the:

- Lost time incident rate, as compared to its industry average.
- Number of fatalities.
- Number of lost time incidents.
- PSM qualified for those operations involving covered processes.
- Recordable injury incidence rate.
- Substance abuse program.
- Written health and safety management program that documents the policy and procedures for a contractor's employees.

Table 3-1 may be used by an owner to develop the acceptance criteria for the different types of work. In completing the table, an owner should consider using last year's results, a three-year average, a comparison to SIC for the contractor type, etc., in developing his/her own criteria. For facilities in other countries, with different record keeping methods, comparable data should be used.

For a small contractor, or when only a single contractor is available to perform the work, exceptions to the acceptance criteria may be considered, if approved by management. As an example, such a contractor may be granted conditional acceptance; however, more stringent controls may be instituted.

3.3 **AN APPROVED CONTRACTOR LIST FOR THE HEALTH AND SAFETY ELEMENT**

Each facility or owner should develop an approved contractors' list. The list should contain the date a contractor is put on the list, the date the list is reviewed/qualified, the type of work a contractor is qualified to perform, and other information as deemed appropriate by an owner. Information on maintaining the list is contained in Section 7.2.

At times, a contractor may be required to perform work on an emergency basis. This may involve bypassing the prequalification step. Management should be aware of the risk of using a contractor on an emergency basis.

Table 3-1 - Typical Acceptance Criteria

Type of Work	Example of Acceptance Criteria			
	Recordable Injury Incidence Rate	Substance Abuse Program	WCB Rate Less Than or Equal To	Written Health and Safety Management Program
Construction, Maintenance, and Operational Personnel in Process Units				
Operation Support				
Distribution				
Administration/Technical				
Site Services				
Construction - Green Field				

4.0 THE SELECTION OF A CONTRACTOR

The steps for an owner to follow in the selection of a contractor are provided in this section.

4.1 AN OWNER IDENTIFIES THE HEALTH AND SAFETY REQUIREMENTS

After determining the type and the scope of work to be performed by a contractor, an owner should identify the health and safety requirements associated with the work and communicate them to a contractor. In some cases, a contractor is used because of his/her expertise, knowledge of the anticipated hazards, and special health and safety requirements associated with the work. In these cases, the primary responsibility for identifying the health and safety requirements is a contractor's; however, an owner should review the work plan (scope of work).

An owner should be thoroughly familiar with the location and the nature of the work. The duration of the project, the type of work to be performed, and the location of the work (off site or on site) are some of the factors an owner should consider prior to developing the health and safety requirements for the prebid package. It is important for an owner to recognize the emergency types of work (e.g., unscheduled, off shift work) may have different additional hazards associated with them.

Specific health and safety requirements should be developed to address the reasonably foreseeable hazards associated with the work to be performed and the location. A contractor should be made aware of the mandatory requirements (e.g., if a contractor is required to perform the maintenance on process equipment, his/her personnel should be fully aware of an owner's safety requirements, such as the work permit system, and the applicable Alberta Labour OH&S legislation, lockout/tag out procedures, etc.).

4.1.1 An Owner Identifies the Training Requirements

A contractor should provide the appropriate information and training so his/her employees have the adequate knowledge and skills to perform their jobs safely. A contractor is responsible for providing the health and safety training for his/her employees unless otherwise stated in the contract. Both an owner and a contractor, upon final review of the scope of work, should identify the necessary health and safety-related training necessary to perform the work. An owner and a contractor should agree on the type and amount of training to be provided, the necessary resources, and who will provide the training.

To assist an owner in identifying and organizing training requirements based on the work to be performed, a training matrix similar to that found in Appendix D should be developed for each location.

4.1.2 The Health and Safety Management Program That Addresses an Owner's Requirements

It is a contractor's responsibility to provide a written health and safety management program that addresses the level of risk associated with the scope of work to be performed. A contractor's health and safety management program should outline the compliance with the applicable codes, standards, and an owner's safety requirements. The potential hazards should be identified, and safety training and hazard communication procedures incorporated. A contractor's health and safety management program should identify the contractor's employee responsible for the health and safety management program, the emergency action plans, the key personnel, and the requirements for the project or work to take place.

Following is a partial list of the components of a contractor's health and safety management program that should have written procedures:

- Abrasive Blasting.
- Asbestos Removal.
- Assurance Equipment Ground - Portable Electrical Tools on Construction Sites.
- Confined Space Entry.
- Excavating, Trenching and Shoring.
- Fall Protection.
- Fire Prevention.
- Forklift and Crane Operations.

- Hazard Communication.
- Health and Safety Training.
- Hot Work and Welding.
- Incident Investigation.
- Inspection (e.g., Personal Protective Equipment (PPE), Tools, Mobile Equipment, Ladders, etc.).
- Line Breaking.
- Orientation.
- Respiratory Protection.
- Scaffolding.
- Walking and Working Surfaces.
- Warning Signs, Signals, and Barricades.
- Work Permits.

In some cases, an owner may require the use of his/her procedures, or a contractor may elect to use an owner's health and safety procedures while at the location. An agreement in writing on the use of the procedures should be entered into prior to beginning the work.

An owner and a contractor should agree on the content and delivery of medical services to a contractor's employees.

4.1.3 The Communication Requirements (Language)

An owner and a contractor have the responsibility to communicate information regarding the work place hazards, and the health and safety requirements to their employees. The communication of this information may include many formats, such as orientation, training, Material Safety Data Sheets, safe work permits, signs, posters, procedures and other written materials.

An owner has several options which can be used to assure a contractor can meet these important safety communication requirements. One way is to require a contractor to provide the availability of bilingual supervision at the job site. Another way is to require a contractor to meet certain English language requirements, based on the level of health and safety risks associated with the type of work to be performed.

4.1.4 The Emergency Response Requirements

It is a contractor's responsibility to comply with an owner's emergency response procedures and evacuation plans. Each contractor should have written procedures for the evacuation and accountability of his/her personnel in the event of an emergency. The evacuation procedures should include designated assembly areas and evacuation routes. An owner and a contractor should know the assembly areas, and understand the method of accounting for personnel during an incident.

A contractor's employees should be trained (know and understand) in an owner's emergency response procedures, including the alarm system and the evacuation plans and routes. This training is normally satisfied through the employee orientation program. However, when the orientation program does not address the emergency response issues, specific emergency response training may be required. This training should include sufficient documentation to verify that all the contractor's employees know and understand the applicable provisions of an owner's emergency response plan.

4.2 AN OWNER PROVIDES THE PREBID PACKAGE

The applicable health and safety requirements and the performance criteria should be included as specifications in the invitation to bid. Typically these include, among others:

- General Safety Rules.
- Personal Protective Equipment (PPE).
- Substance Abuse Screening.
- Vehicle Safety Requirements.
- Work Permit System.

An owner should identify the appropriate representatives to be contacted regarding the hazards and the health and safety requirements if clarification is required by the bidders.

4.3 THE PREBID MEETING WITH AN APPROVED CONTRACTOR

The prebid site visits and the prebid meetings provide prospective bidders with an opportunity to evaluate the job site conditions, and to obtain clarification of the bid or the work scope requirements.

All meetings held prior to the award should be conducted in accordance with an applicable owner's contract procedures. The following general guidelines should apply to such meetings:

- Prepare an agenda for each meeting, which may include the:

Introduction of an Owner's/Contractor's Participants

- ◇ Brief description of the evaluation process and the target award date.
- ◇ Point of contact for the questions.
- ◇ Role of the participants.

Review of the Schedule Requirements

- ◇ Emergency response requirements.
- ◇ Incident investigation and the report protocol.
- ◇ Milestone dates.

Review of the Site Considerations

- ◇ Access and work areas.
- ◇ Facilities and utilities provided.
- ◇ Health and safety considerations.
- ◇ Permits required and furnished (site and regulatory).

Review of the Technical Requirements

- ◇ Interfaces with the other contractors' crews/work packages.
- ◇ Overview of the scope.
- ◇ Quality.

Questions

- Record the attendance, the pertinent information, and the questions and answers.
- Issue the meeting minutes to all the attendees and the prospective bidders.

The prebid meeting is an owner's opportunity to elaborate on the requirements stated in the bid documents. In addition, it provides a forum for an interactive exchange with the potential bidders to discuss their questions and concerns.

The prebid site visit provides the bidders an opportunity to examine the job site in order to reach their own conclusions regarding the many site-related factors (e.g., access/congestion, labor market, lay down area, physical conditions/constraints). It is also an opportunity for an owner to share any unique knowledge regarding the project or site, and how such factors might affect the contract.

4.4 THE SELECTION OF A CONTRACTOR

No contract should be awarded until a selected contractor's ability to comply with the applicable health and safety regulations, as well as with an owner's health and safety requirements, has been addressed.

Upon completion of the health and safety criteria evaluation, and a thorough review of a contractor's ability to comply with the applicable health and safety requirements, an owner should select the technically qualified contractor who meets the health and safety requirements of the project. The final selection is made with the consideration of the selection criteria established in Section 3. A commitment should then be made by an owner and a contractor to work together to safely complete the project.

4.5 THE PREAWARD MEETING

The preaward meeting should be held with a selected contractor to ensure a clear, mutual understanding of the work to be awarded has been reached. The preaward meeting is held after the selection and the approval of a contractor, but prior to the award. The preaward meeting provides an opportunity to:

- Confirm the acceptability of all the proposed substitutions.
- Discuss an owner's/contractor's relationship for a subcontractor, if applicable.
- Discuss the reporting requirements of a contractor.
- Discuss the specific health and safety activities that should be accomplished by a contractor.
- Reaffirm and confirm the understandings that have been reached during the prebid/bidding stages, and resolve the detail issues that affect a contractor.
- Review the emergency response actions.

4.5.1 The Modifications to the Health and Safety Requirements

An owner's health and safety requirements and performance criteria should have already been reviewed by a contractor. A contractor should identify any possible hazards or hazardous conditions that may arise from the proposed actions or methods when performing the work. An owner and a contractor can work together to determine the necessary safety requirements, recognizing that a contractor retains primary and ultimate responsibility for the health and safety of his/her employees, and for ensuring the work performed by a contractor does not create hazards to others. An owner and a contractor should assist each other to define the emergency response activities, the emergency work, the off shift work procedures, and the variance procedures, as well as the overall scope of the work.

4.5.2 An Owner Verifies a Contractor has the Ability to Comply

A contractor should provide the documentation to verify the company can comply with the applicable health and safety requirements, and with the performance criteria. The form and detail of these assurances should take into account the previous experience with a contractor, the type of work to be performed, and the level of risk. As a minimum, an owner should verify the information provided on a contractor's prequalification form.

4.6 THE AWARD TO A CONTRACTOR

A contractor should sign a written agreement (normal and contract) which commits a contractor to, among other things:

- Abide by the applicable governmental and an owner's health and safety requirements.
- Employ, or cause to be employed, only persons who are fit, trained, and skilled in the work to be performed.
- Provide an authorized owner's representatives access to their work areas.
- Provide and/or use equipment that is safe to operate, and meets the governmental and an owner's requirements.

The agreement should clearly state a contractor, not an owner, retains the authority to hire, fire, discipline, supervise, control, and direct the work of his/her employees, as well as to modify the terms and conditions of their employment.

4.7 THE EMERGENCY WORK

An owner should establish procedures for handling emergency work where it may not be practical to follow the normal procedures.

5.0 THE PREJOB ACTIVITIES

An owner and a contractor should cooperate fully in prejob activities, using the opportunity to verify a contractor becomes familiar with the location, facility, personnel and other work information. This prejob review is recognized as an important bridging step in working together to prevent incidents and to resolve health and safety issues. At this time, a contractor has the opportunity to review the fire, safety, and emergency evacuation areas, as well as to observe the work environment. The amount of detail and effort for the prejob activities should be commensurate with the level of risk for the work.

5.1 THE SITE ORIENTATION

Prejob reviews should be held with a contractor to provide a facility/site orientation and to communicate a contractor's health and safety requirements are understood. See Appendix E for a sample checklist of items to consider on a site visit.

Prior to beginning work, a contractor is informed by an owner's representatives of the following:

- Known hazards to which he/she or his/her employees may be exposed.
- Appropriate precautionary measures for such hazards.
- Additional owner's health and safety requirements, including emergency procedures, that may have changed since the preaward meeting.
- Site security and control.

An owner and a contractor, working together, should verify the work can be performed within the work site as designed. Both an owner and a contractor should be aware of the effect of the activity on the work environment. Each stage of the project should be carefully planned and thoroughly reviewed, and accepted by both an owner and a contractor prior to beginning the work. If a subcontractor is involved, his/her work plans and methods should be reviewed and accepted by a contractor.

5.2 FINALIZING THE HEALTH AND SAFETY REQUIREMENTS

An owner and a contractor, during the prejob activities, should review the health and safety requirements already referenced, identify additional requirements, or delete unnecessary requirements. Further, an owner and a contractor should evaluate the health and safety requirements on an ongoing basis, so both may adapt to changes in the work conditions.

A contractor should inform an owner of any known hazards a contractor is bringing to the job.

5.2.1 The Overlays

An owner often adds to the Alberta Labour OH&S legislation requirements for health and safety. In some cases, it may be necessary to overlay the Alberta Labour OH&S requirements due to the site specific needs. However, establishing unnecessary overlays may cause misunderstanding on the part of a contractor's employees, because they may work at several different facilities with different requirements for the same work. An owner is encouraged to analyze the requirements that exceed those required by the Alberta Labour OH&S to determine if there is value added by the overlay. For example, the Alberta Labour OH&S has requirements on building scaffolding, yet almost every company has developed overlays of the Alberta Labour OH&S requirements. This requires additional training and understanding of each owner's requirements and the verification of a contractor's understanding of these requirements.

An owner should consider the benefits of eliminating or reducing overlay requirements. These benefits include:

- Improved safety performance.
- Increased productivity.
- Reduction in an owner's site specific training on overlaid procedures.
- Reduction in the training time required by a contractor's employer.

5.2.2 The Final Review of a Contractor's Health and Safety Requirements

An owner should conduct a final review of a contractor's ability to comply with the health and safety requirements.

5.2.3 A Contractor's Review of Personnel, Tools, and Equipment

Using an owner's information, hazard communication information, and prejob checklist, a contractor should:

- Ascertain the personnel have the information, knowledge, and training necessary to safely perform their assignments.
- Determine the resources of manpower, safety equipment and training are adequate for the job.
- Perform a final assessment of his/her ability to perform the scope of the work, and comply with all the applicable health and safety requirements.

Personal Protective Equipment (PPE) requirements should be finalized and agreed to by an owner and a contractor. The issues of who provides the PPE and who maintains the PPE should be determined before the work starts. Normally, a contractor is accountable for providing and maintaining the PPE, unless otherwise stated in the contract.

5.3 PLANNING THE WORK

A contractor has the responsibility for the planning, performance, and completion of the work. An owner has the responsibility for reviewing the plan and monitoring a contractor's performance. An owner and a contractor should fully understand their individual responsibilities during the planning, performance, and completion stages of the work.

While developing the plan for conducting the work, an owner and a contractor should identify the precautions to be addressed (i.e., emergency procedures, inspection and evaluation procedures, and training requirements).

An owner may notify a contractor where the health and safety requirements are not being met, but it is the responsibility of a contractor, not an owner, to communicate the steps that should be taken to correct the deficiencies to a contractor's employees.

An owner and a contractor should agree on the safe work practices to be used to control the entrance, the presence and the exit of the contractor's employees from the covered process area.

5.4 TRAINING

A contractor should verify his/her employees are properly trained to perform the necessary tasks, and are educated regarding an owner's health and safety policies, procedures, and hazards associated with the work.

An owner should verify a contractor's employee orientation training consists of a review of the general health and safety policies, as well as the facility specific procedures. Typically, this training may include:

- Emergency Response Actions and Alarms.
- Hazardous Materials at the Facility.
- Process and Plant Overview.
- Security.
- Vehicle Safety.
- Work Permit System.

A method to determine the understanding of the training should be part of the training program. This may include written and verbal examinations, walk-through demonstrations, etc. These should be conducted under the supervision of a contractor. Field reviews and inspections by an owner and a contractor can also further confirm a contractor's understanding of the health and safety requirements. Retraining should be provided when the demonstration of knowledge is not obtained.

5.4.1 The Verification of the Training

Records of the training should be maintained by a contractor and made available to an owner. An owner should periodically review a contractor's training records to verify the proper training, which meets an owner's criteria, is being conducted. A contractor should periodically review the training schedules and materials to verify they are current.

6.0 THE WORK IN PROGRESS

An owner and a contractor each have roles to play in evaluating and monitoring the work on a continuing basis. An owner should monitor the work place health and safety by visiting the work site. A contractor conducts periodic field inspections to observe the safe practices. These inspections should be used as tools by an owner and a contractor to improve the health and safety performance when required.

6.1 THE STATISTICAL REPORTING

A contractor should classify and record work-related injuries and illnesses in accordance with the applicable government regulations under the Alberta Labour OH&S record keeping requirements for occupational illnesses and injuries. A contractor should maintain a record of all first aid calls and periodically provide it to an owner.

Periodic health and safety performance reports should be completed by a contractor who works on site. A sample reporting form is shown in Appendix F. An owner should use this information to monitor a contractor's health and safety performance. Additionally, the information in Section 7.0 may be used during performance evaluations.

6.2 THE INSPECTIONS

It is important to monitor a contractor's compliance with the health and safety requirements on an ongoing basis. The frequency of monitoring may depend upon the level of risk associated with the work a contractor is performing.

6.2.1 The Inspections by an Owner

An owner should periodically inspect a contractor's health and safety management program, and policies and procedures, and request they be updated when circumstances warrant a revision. It is also important for an owner to periodically monitor a contractor's work for compliance with the health and safety requirements. An owner serves in an oversight role for these activities. This oversight role does not involve direct supervision, instruction, or management of a contractor's personnel unless specifically authorized to do so by the appropriate management. Best efforts are made to preserve the independence of such a contractor.

Typical monitoring systems which may be used include:

- **Informal Job Site Reviews**
A "walk-through" health and safety review may be performed by an owner. This is an informal review that does not have to be documented.
- **Formal Periodic Health and Safety Inspections**
Periodic inspections should be conducted and documented by an owner to monitor a contractor's health and safety performance, and address deficiencies. Serious conditions or issues of noncompliance should be documented and corrected immediately. A sample inspection checklist that could be used by an owner and a contractor is provided in Appendix G.

6.2.2 The Inspections by a Contractor

A contractor should conduct periodic internal reviews and provide the results to an owner, to verify compliance with the applicable governmental and owner's health and safety requirements. A contractor should document inspections and provide a copy to an owner. The checklist provided in Appendix G is suitable for both an owner's and a contractor's inspections.

6.2.3 The Review of the Findings

A system to review the audit and inspection findings should be implemented by an owner and a contractor. The findings should reflect the recommendations for the follow-up corrective actions agreed to by both an owner and a contractor. These recommendations and corrective actions should be communicated to an owner's and a contractor's employees.

6.2.4 The Corrective Actions

The recommended corrective actions should be tracked by a contractor in a systematic manner, and should reflect closure of the recommendation when the corrective action is completed. An owner should review all open corrective actions to expedite corrections.

6.3 THE INCIDENT INVESTIGATION

A contractor should report all occupational injuries, illnesses, and incidents/near misses associated with a contractor's on site work.

Incidents should be reported on an incident report form specified by an owner. Typical information on an incident reporting form may include the:

- Accident/incident description.
- Identification and implementation of the corrective actions to prevent a recurrence.
- Immediate and root causes of the accident/incident.
- Management and/or program deficiencies.
- Names of the affected employees or the witnesses.
- Person responsible for assuring the implementation of the corrective actions.
- Timetables for the corrective actions.

Copies of all the incident reports should be given to an owner following the event. An owner should share the incident reports that could improve or impact a contractor's safety with the appropriate contractor working at the facility.

An owner and a contractor should conduct a joint incident investigation for a contractor's incidents/near misses.

6.4 THE EMERGENCY DRILLS/EXERCISES

A contractor's employees, after receiving the appropriate orientation and training in emergency procedures, should participate in emergency drills and exercises. An owner should advise a contractor he/she is required to participate in any drills which are conducted. A contractor should be adequately trained and informed of the actions he/she should take at these times. A contractor should have knowledge of an owner's alarm system and the emergency procedures.

A contractor working in the "Green Field" areas needs to be aware of the emergency procedures for interfacing with an owner, and the accountability requirements for a contractor's employees.

6.5 THE CHANGE IN THE WORK SCOPE

Often during the project, the work scope is modified. When this occurs, an owner and a contractor should review the guidance in Sections 4 and 5 for areas that may require modification to the health and safety requirements.

7.0 THE PERFORMANCE EVALUATION

The ongoing health and safety performance of a contractor who works on site should be reviewed by an owner on a periodic basis. These reviews may include:

- Evaluation of a contractor's performance.
- Informal job site reviews (discussed in Section 6.2).
- Periodic health and safety inspections (discussed in Section 6.2).
- Reevaluation of an approved contractors' list.

The evaluations of a contractor's health and safety performance should be based on the duration of the project, the level of risk for the type of work being performed, and the safety performance of a contractor over the period of performance. Information on the evaluation report should be maintained by an owner for use when considering a contractor for future work.

The evaluation may be done at the completion of a job, the termination of a contractor, or periodically during the job. If a contractor has a division of a corporate health and safety group, joint evaluations by an owner and a contractor may be considered.

7.1 THE EVALUATION OF A CONTRACTOR

Meetings should be held periodically with an owner and a contractor to review, discuss, and evaluate a contractor's health and safety performance. A contractor should be represented by a senior contractor's representative at the site unless the contract specifies otherwise. Topics addressed may include the:

- Accident and incident summary.
- Health and safety issues.
- Owner's and contractor's inspections.
- Performance.
- Training conducted, the documentation, and the level of detail.

If a contractor, based on a contractor's evaluation and health and safety performance, does not meet an owner's expectations and requirements, then a contractor should be given an opportunity to discuss the issues and develop corrective action. In appropriate cases, consistent with contractual provisions, an owner may determine a contractor should be terminated. Appendix H contains sample contractor's health and safety performance evaluation forms.

7.1.1 A Resident Contractor

A resident contractor working in the facility on a routine basis should be evaluated at least annually, and in cases where safety performance warrants, evaluation should be conducted more frequently. The evaluation should be conducted using specific protocols, with results provided to a contractor who develops the corrective action plan.

7.1.2 A Nonresident Contractor

A nonresident contractor falls into two categories--he/she who performs a single job and generally does not return, and he/she who does short-term jobs periodically throughout the year. A nonresident contractor who is expected to fulfill only one contract should be evaluated at the end of that contract. A nonresident contractor who performs and fulfills several small contracts should be evaluated periodically (e.g., after every third contract).

7.2 THE PERIODIC EVALUATION OF THE APPROVED CONTRACTORS LIST

An owner's approved contractors list should be regularly updated. Since the number of contractors on the approved list could be substantial, two approaches are suggested. The first approach should be the submission and the evaluation of an updated contractor's prequalification form to determine if a contractor still meets the health and safety criteria. In the second approach, a satisfactory health and safety performance evaluation may be used as the basis for a contractor remaining on an owner's approved contractors list.

8.0 PUTTING IT ALL TOGETHER

As with any management system, key requirements must be in place in order for a contractor health and safety management program to be successful. This section identifies the key management requirements for an owner, a contractor, and a subcontractor in the implementing of a contractor health and safety management program.

8.1 MANAGEMENT'S COMMITMENT

Management's commitment is essential in minimizing incidents and preventing injuries and illnesses. Management's commitment begins with providing the resources (both personnel and monetary) for implementing and maintaining an effective contractor health and safety management program. It continues throughout the ongoing support of the program by participating in activities, communicating expectations, and measuring progress.

8.2 THE POLICY STATEMENT

Management's commitment is best expressed in a policy that establishes the importance of a contractor health and safety management program. Management's involvement helps ensure the effectiveness of a contractor health and safety management program. An example facility policy statement on a contractor health and safety management program is shown in Appendix I.

8.3 A WRITTEN CONTRACTOR HEALTH AND SAFETY MANAGEMENT PROGRAM

A written program should be developed to include the procedures for the elements contained in Figure 2-1, on page four. An example of an owner's written contractor health and safety management program is shown in Appendix J.

8.4 THE RESPONSIBILITIES

Responsibilities are established to support an overall contractor health and safety management program. Examples of responsibilities that need to be assigned to personnel at a facility are shown in Table 8-1.

Management should assign responsibilities within their health and safety management program to specific individuals and groups at the facility.

8.5 THE REVIEW OF AN OWNER CONTRACTOR'S HEALTH AND SAFETY MANAGEMENT PROGRAM

An owner should establish a system for reviewing his/her contractor health and safety management program. This review should include verifying the required elements of a contractor's health and safety management program are in place and are effective. A sample audit protocol for evaluating an owner's contractor health and safety management program is contained in Appendix K.

The audit should be conducted by a team of individuals knowledgeable in a contractor health and safety management program, who have been involved with a contractor's activities. The audit methodology should consist of reviewing documentation and conducting on site interviews with the various levels of the facility's and a contractor's personnel.

The information reviewed during the audit of the host employer's program may include the:

- Contractor's evaluation.
- Contractor's selection criteria.
- Contracts for the appropriate language.
- Implementation of the PSM requirements, when appropriate.
- Incident reports.
- Owner's and contractor's audits.
- Performance monitoring reports and the corrective actions.
- Post work evaluations.
- Quality of the work.

TABLE 8-1 - THE SAMPLE RESPONSIBILITY TASKS

Task
<p><u>General</u></p> <ul style="list-style-type: none">• Develop a written contractor health and safety management program, containing the elements within this publication.• Develop and implement a contractor's facility orientation program.• Designate a person as the focal point for a contractor health and safety management program.
<p><u>Contractor Prequalification</u></p> <ul style="list-style-type: none">• Establish a prequalification program that includes the criteria a contractor should meet.• Develop and maintain an approved contractors list.• Maintain a file on each contractor on the approved contractors list.• Review a contractor's prequalification package, and determine if the health and safety criteria are met.
<p><u>Selection of a Contractor</u></p> <ul style="list-style-type: none">• Communicate the process overview and hazards associated with the process to a contractor.• Verify a contractor's personnel have the required health and safety training, and have proven, demonstrated skills for the jobs to which they will be assigned.• Verify a contractor has a copy of an owner's health and safety policies and procedures.• Verify a contractor has clauses requiring a contractor to meet all the governmental and an owner's specific health and safety policies and standards.• Participate in prebid/preaward meetings.
<p><u>Prejob Activities</u></p> <ul style="list-style-type: none">• Communicate the overview and the hazards associated with the process to a contractor.• Verify prejob safety conferences are an integral part of the preplanning process.• Verify a contractor's personnel have the required health and safety training, and have proven, demonstrated skills for the jobs to which they are assigned.• Participate in reviewing the prework plan for the appropriate health and safety activities.• Monitor the condition of a contractor's equipment to verify compliance with the applicable standards.• Monitor a contractor's health and safety performance with an owner's policies and procedures.• Participate in the prework meetings and in the review of a contractor's work plans.
<p><u>Work in Progress</u></p> <ul style="list-style-type: none">• Periodically review and document the health and safety performance of a contractor, and provide feedback to a contractor.• Motivate and encourage a contractor to expand the development of his/her own health and safety management program.• Coordinate the work efforts among contractors to make sure jobs performed by one contractor will not be a hazard to another contractor.• Assist a contractor in incident/accident investigation.• Ensure a contractor maintains injury and illness logs.• Facilitate the interchange of incident learning experiences among contractors.• Participate in the review of a contractor's health and safety performance during the work.• Verify the emergency response actions are understood and carried out by a contractor.
<p><u>Performance Evaluation</u></p> <ul style="list-style-type: none">• Provide an audit mechanism for a contractor health and safety management program.• Periodically review and document the health and safety performance of a contractor, and provide feedback to a contractor.• Motivate and encourage a contractor to expand the development of his/her own health and safety management program.• Participate in the review of a contractor's health and safety performance after the work is completed.• Reevaluate the approved contractors' list.• Conduct an evaluation of an owner's contractor's health and safety management program.

8.6 THE IMPLEMENTATION

A Facility Steering Committee that has the responsibility for implementing an owner's contractor health and safety management program may be considered. This committee may have representation from the following:

- Construction.
- Engineering.
- Health and Safety.
- Maintenance.
- Operations.
- Purchasing.
- Training.

The Facility Steering Committee will effect a positive change in culture relative to the management of the contractors at the location. It will focus on:

- Communication/Recognition.
- Computer Support.
- Continuing Improvement.
- Implementation.
- Measurement.
- Process Ownership.

8.7 THE TRAINING

Training should be considered for facility management that provides orientation in a contractor health and safety management program and its key elements. More detailed training should be considered for those individuals at the facility who will make the program work--in particular, those chosen to monitor a contractor while on site.

LIST OF APPENDIXES

- Appendix A Sample - Contractor Prequalification Form (PQF)**
- Appendix B Sample - Covering Letter for the Contractor Prequalification Form (PQF)**
- Appendix C Sample - Contractor Prequalification Evaluation Form**
- Appendix D Sample - Training Matrix Outline**
- Appendix E Sample - Site Visit Checklist**
- Appendix F Sample - Contractor's Monthly Statistical Data Report**
- Appendix G Sample - Job Site Inspection Checklist**
- Appendix H Sample - Contractor's Health and Safety Performance Evaluation Form**
- Appendix I Sample - Contractor's Health and Safety Policy Statement**
- Appendix J Sample - Owner's Written Contractor Health and Safety Management Program**
- Appendix K Sample - Audit Protocol for an Owner's Contractor Health and Safety Management Program**

FOREWORD

This publication is intended as an Owners' Guide for Contractor health and safety management. If followed, it will assist in ensuring Contractors are appropriately prequalified for health and safety competency, and will ensure the contract work is carried out with appropriate regard for the health and safety of those involved.

Any contractors' health and safety management process should conform to the requirements identified in this publication. However, it is necessary to assess the contractors' commitment to health and safety at every stage of the work because, without this commitment, health and safety is inevitably jeopardized.

This publication has been prepared by the Construction Owners' Association of Alberta for use in Alberta. However, in its use consideration must be given to the interpretation of the Alberta Occupational Health and Safety Act. The publication is based on a similar publication prepared by the Chemical Manufacturing Association (CMA) and the American Petroleum Institute (API).

This publication is an Owners' Guide and, as such, it must be supplemented with the specific local considerations applicable to each contract. Suggestions to improve the Guide are invited. They should be submitted to the Construction Owners' Association of Alberta, Suite 1410, Oxford Tower, 10235 - 101 Street, Edmonton, Alberta, 403-420-1145.

This document is a draft prepared for the purposes of the Construction Best Practices III Workshop, May 10, 1995. Any and all comments for improvements, correction of errors or typographical errors ought to be forwarded to:

Construction Owners' Association of Alberta
Suite 1410, Oxford Tower
10235 - 101 Street
Edmonton, Alberta

c/o Mike Thomas

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It is intended that a finalized copy of this Owner's Guide will be issued a reasonable time after May 10, 1995.

APPENDIX A

Sample

Contractor Prequalification Form (PQF)

Purpose

This appendix contains a detailed sample of a Contractor Prequalification Form (PQF), which determines whether or not a contractor will be added to a facility's approved contractors list.

When to Use

When adding to, or updating, the approved contractors list.

Who Uses

An owner.

Note: From the contractor's perspective, modification of this form should be minimized.

Section Reference: 3.1
Page: 9

Contractor Prequalification Form (PQF)

GENERAL INFORMATION			
1. Company Name:		Telephone Number:	
		FAX Number:	
Street Address:		Mailing Address:	
Province:	Postal Code:	Province:	Postal Code:
2. Officers:		Years With Company	
President:			
Vice-President:			
Treasurer:			
3. How many years has your organization been in business under your present firm name?			
4. Parent Company Name:			
City:		Province:	Postal Code:
Subsidiaries:			
5. Under Current Management Since (Date):			
6. Contact for Requesting Bids:			
Title:	Telephone:	Fax:	
7. Contractor's PQF Completed By:			
Title:	Telephone:	Fax:	
ORGANIZATION			
8. Form of Business Sole Owner <input type="checkbox"/> Partnership <input type="checkbox"/> Corporation <input type="checkbox"/>			
9. Percentage Owned:			
10. Describe Services Performed:			
<input type="checkbox"/> Construction	<input type="checkbox"/> Original Equipment Manufacturer and Maintenance		
<input type="checkbox"/> Construction Design	<input type="checkbox"/> Project Maintenance		
<input type="checkbox"/> Maintenance	<input type="checkbox"/> Service Work (e.g., Janitorial, Clerical, etc.)		
<input type="checkbox"/> Manpower and Resources	<input type="checkbox"/> Other		
<input type="checkbox"/> Original Equipment Manufacturer and Installer			
11. Describe the Additional Services Performed:			
12. List other types of work within the services you normally perform that you subcontract to others, including brokers:			

Contractor Prequalification Form (PQF)

13. Do you evaluate your subcontractor's health and safety program?					
14. Attach a list of the major equipment (e.g., cranes, forklifts, JLGs) your company has available for work at this facility, and the method of establishing the competencies to operate this equipment.					
15. Describe any affiliations with labour organizations.					
16. Annual Dollar Volume for the Past Three Years:		19 ____ \$ ____	19 ____ \$ ____	19 ____ \$ ____	
17. Largest Job During the Last Three Years: \$					
18. Your Firm's Desired Project Size:		Maximum:		Minimum:	
19. Financial Rating:		D and B:		Net Worth:	
COMPANY WORK HISTORY					
20. Major jobs in Progress:					
Customer/Location	Type of Work	Size \$M	Customer Contact	Telephone	Fax
21. Major jobs Completed in the Past Three Years:					
Customer/Location	Type of Work	Size \$M	Customer Contact	Telephone	Fax
22. Are there any judgments, claims or suits pending or outstanding against your company? If yes, please attach details. Yes <input type="checkbox"/> No <input type="checkbox"/>					
23. Are you now, or have you ever been, involved in any bankruptcy or reorganization proceedings? If yes to either of the above questions, please attach details. Yes <input type="checkbox"/> No <input type="checkbox"/>					
HEALTH AND SAFETY PERFORMANCE					
24. From the last three years (including subcontractors):		19 ____	19 ____	19 ____	
• Number of fatalities?					
• Number of lost time incidents?					
• Number of medical aid injuries?					
• Do you have a modified work program?					
25. Please list your past three years' recordable injury incidence rate (including subcontractors): _____, 19____, _____, 19____, _____, 19____					
<u>Number of Lost Time Accidents x 200,000</u> Total Employee Hours (Yearly)					

Contractor Prequalification Form (PQF)

26. Man hours (including those of the subcontractors) worked in the last three years:	Year	19____	19____	19____
	Hours	Field		
		Total		
27. Please list your overall Worker's Compensation Rating for the past three years. Please attach your company's WCB summary. _____, 19____ _____, 19____ _____, 19____				
28. Have you received an Alberta Labour OH&S stop work order, or equivalent, from another province in the last three years? Yes <input type="checkbox"/> No <input type="checkbox"/> Describe _____ _____				
HEALTH AND SAFETY MANAGEMENT				
29. Highest ranking safety professional in your organization:				
Title:	Telephone:	Fax:		
30. Do you have, or provide:				
• A full-time health and safety representative?			Yes <input type="checkbox"/>	No <input type="checkbox"/>
• A full-time site health and safety representative?			Yes <input type="checkbox"/>	No <input type="checkbox"/>
HEALTH AND SAFETY PROGRAM AND PROCEDURES				
31. Do you have a written Health and Safety Management Program? Yes <input type="checkbox"/> No <input type="checkbox"/>				
Does the program address the following key elements:				
• Accountabilities and responsibilities for managers, supervisors, and employees?			Yes <input type="checkbox"/>	No <input type="checkbox"/>
• Employee participation?			Yes <input type="checkbox"/>	No <input type="checkbox"/>
• Hazard recognition and control?			Yes <input type="checkbox"/>	No <input type="checkbox"/>
• Management commitment and expectations?			Yes <input type="checkbox"/>	No <input type="checkbox"/>
• Periodic health and safety performance appraisals for all employees?			Yes <input type="checkbox"/>	No <input type="checkbox"/>
• Resources for meeting health and safety requirements?			Yes <input type="checkbox"/>	No <input type="checkbox"/>
32. Does the program include work practices and procedures such as:				
• Accident/Incident Reporting?			Yes <input type="checkbox"/>	No <input type="checkbox"/>
• Compressed Gas Cylinders?			Yes <input type="checkbox"/>	No <input type="checkbox"/>
• Confined Space Entry?			Yes <input type="checkbox"/>	No <input type="checkbox"/>
• Electrical Equipment Grounding Assurance?			Yes <input type="checkbox"/>	No <input type="checkbox"/>
• Emergency Preparedness, including an Evacuation Plan?			Yes <input type="checkbox"/>	No <input type="checkbox"/>
• Equipment Lockout and Tag Out (LOTO)?			Yes <input type="checkbox"/>	No <input type="checkbox"/>
• Fall Protection?			Yes <input type="checkbox"/>	No <input type="checkbox"/>
• Housekeeping?			Yes <input type="checkbox"/>	No <input type="checkbox"/>
• Injury and Illness Recording?			Yes <input type="checkbox"/>	No <input type="checkbox"/>
• Personal Protective Equipment (PPE)?			Yes <input type="checkbox"/>	No <input type="checkbox"/>
• Portable Electrical/Power Tools?			Yes <input type="checkbox"/>	No <input type="checkbox"/>
• Powered Industrial Vehicles (Cranes, Forklifts, JLGs, etc.)?			Yes <input type="checkbox"/>	No <input type="checkbox"/>
• Unsafe Condition Reporting?			Yes <input type="checkbox"/>	No <input type="checkbox"/>
• Vehicle Safety?			Yes <input type="checkbox"/>	No <input type="checkbox"/>
• Waste Disposal?			Yes <input type="checkbox"/>	No <input type="checkbox"/>

Contractor Prequalification Form (PQF)

<p>33. Do you have written programs for the following:</p> <ul style="list-style-type: none"> • Hearing Conservation? Yes <input type="checkbox"/> No <input type="checkbox"/> • Respiratory Protection? Yes <input type="checkbox"/> No <input type="checkbox"/> <li style="padding-left: 20px;">Where applicable, have employees been: <li style="padding-left: 40px;"><input type="checkbox"/> Fit Tested? <li style="padding-left: 40px;"><input type="checkbox"/> Medically Approved? <li style="padding-left: 40px;"><input type="checkbox"/> Trained? • WHMIS? Yes <input type="checkbox"/> No <input type="checkbox"/> 																
<p>34. Do you have a Substance Abuse Program? Yes <input type="checkbox"/> No <input type="checkbox"/></p> <p>If yes, does it include the following:</p> <ul style="list-style-type: none"> • Preemployment? Yes <input type="checkbox"/> No <input type="checkbox"/> • Random Testing? Yes <input type="checkbox"/> No <input type="checkbox"/> • Testing for Cause? Yes <input type="checkbox"/> No <input type="checkbox"/> 																
<p>35. Medical:</p> <p>Do you conduct medical examinations for:</p> <ul style="list-style-type: none"> • Preemployment? Yes <input type="checkbox"/> No <input type="checkbox"/> • Pulmonary? Yes <input type="checkbox"/> No <input type="checkbox"/> • Replacement Job Capability? Yes <input type="checkbox"/> No <input type="checkbox"/> • Respiratory? Yes <input type="checkbox"/> No <input type="checkbox"/> <p>Describe how you will provide First Aid and other medical services for your employees while on site. Specify who will provide this service: _____</p> <p>Do you have personnel trained to perform First Aid and CPR? Yes <input type="checkbox"/> No <input type="checkbox"/></p>																
<p>36. Do you hold site safety meetings for:</p> <table style="width:100%; border: none;"> <tr> <td style="width:30%;">• Employees?</td> <td style="width:10%;">Yes <input type="checkbox"/></td> <td style="width:10%;">No <input type="checkbox"/></td> <td style="width:50%;">Frequency _____</td> </tr> <tr> <td>• Field Supervisors?</td> <td>Yes <input type="checkbox"/></td> <td>No <input type="checkbox"/></td> <td>Frequency _____</td> </tr> <tr> <td>• New Hires?</td> <td>Yes <input type="checkbox"/></td> <td>No <input type="checkbox"/></td> <td>Frequency _____</td> </tr> <tr> <td>• Subcontractors?</td> <td>Yes <input type="checkbox"/></td> <td>No <input type="checkbox"/></td> <td>Frequency _____</td> </tr> </table> <p>Are the health and safety meetings documented?</p>	• Employees?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Frequency _____	• Field Supervisors?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Frequency _____	• New Hires?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Frequency _____	• Subcontractors?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Frequency _____
• Employees?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Frequency _____													
• Field Supervisors?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Frequency _____													
• New Hires?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Frequency _____													
• Subcontractors?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Frequency _____													
<p>37. Personal Protection Equipment (PPE):</p> <p>Is applicable PPE provided for employees? Yes <input type="checkbox"/> No <input type="checkbox"/></p> <p>Do you have a program to ensure PPE is inspected and maintained? Yes <input type="checkbox"/> No <input type="checkbox"/></p>																
<p>38. Do you have a corrective action process for addressing individual health and safety performance deficiencies? Yes <input type="checkbox"/> No <input type="checkbox"/></p>																
<p>39. Equipment and Materials:</p> <ul style="list-style-type: none"> • Do you conduct inspections on operating equipment (e.g., cranes, forklifts, JLGs, etc.) in compliance with the regulatory requirements? Yes <input type="checkbox"/> No <input type="checkbox"/> • Do you have a system for establishing the applicable health, safety, and environmental specifications for the acquisition of materials and equipment? Yes <input type="checkbox"/> No <input type="checkbox"/> • Do you maintain operating equipment in compliance with the regulatory requirements? Yes <input type="checkbox"/> No <input type="checkbox"/> • Do you maintain the applicable inspection and maintenance certification records for operating equipment? Yes <input type="checkbox"/> No <input type="checkbox"/> 																

Contractor Prequalification Form (PQF)

40. Subcontractors:
 Do you evaluate the ability of subcontractors to comply with applicable health and safety requirements as part of the selection process? Yes No
 Do you include your subcontractors in:

- Audits? Yes No
- Health and Safety Meetings? Yes No
- Health and Safety Orientation? Yes No
- Inspections? Yes No

Do your subcontractors have a written Health and Safety Management Program? Yes No
 Do you use health and safety performance criteria in the selection of subcontractors? Yes No

41. Inspections and Audits:

- Are corrections of the deficiencies documented? Yes No
- Do you conduct health and safety inspections? Yes No
- Do you conduct Health and Safety Management Program audits? Yes No

42. Craft Training:

- Are employees' job skills certified, where required, by regulatory or industry consensus standards? Yes No
- Have employees been trained in the appropriate job skills? Yes No
- List crafts which have been certified:

HEALTH AND SAFETY TRAINING

43. Safety Orientation Program: New Hires Supervisors

- Do you have a Health and Safety Management Orientation Program for new hires and newly hired or promoted supervisors? Yes No Yes No
- Does this program provide instruction on the following:

• Emergency Procedures?	Yes <input type="checkbox"/>	No <input type="checkbox"/>			Yes <input type="checkbox"/>	No <input type="checkbox"/>
• Fire Protection and Prevention?	Yes <input type="checkbox"/>	No <input type="checkbox"/>			Yes <input type="checkbox"/>	No <input type="checkbox"/>
• First Aid Procedures?	Yes <input type="checkbox"/>	No <input type="checkbox"/>			Yes <input type="checkbox"/>	No <input type="checkbox"/>
• Incident Investigation?	Yes <input type="checkbox"/>	No <input type="checkbox"/>			Yes <input type="checkbox"/>	No <input type="checkbox"/>
• New Worker Orientation?	Yes <input type="checkbox"/>	No <input type="checkbox"/>			Yes <input type="checkbox"/>	No <input type="checkbox"/>
• Safe Work Practices?	Yes <input type="checkbox"/>	No <input type="checkbox"/>			Yes <input type="checkbox"/>	No <input type="checkbox"/>
• Safety Intervention?	Yes <input type="checkbox"/>	No <input type="checkbox"/>			Yes <input type="checkbox"/>	No <input type="checkbox"/>
• Safety Supervisors?	Yes <input type="checkbox"/>	No <input type="checkbox"/>			Yes <input type="checkbox"/>	No <input type="checkbox"/>
• Toolbox Meetings?	Yes <input type="checkbox"/>	No <input type="checkbox"/>			Yes <input type="checkbox"/>	No <input type="checkbox"/>
• WHMIS Training?	Yes <input type="checkbox"/>	No <input type="checkbox"/>			Yes <input type="checkbox"/>	No <input type="checkbox"/>
• How long is the orientation program?	_____ Hours				_____ Hours	

44. Health and Safety Training Program:

- Do you have a specific Health and Safety Training Program for supervisors? Yes No
- Do you know the regulatory health and safety training requirements for your employees? Yes No
- Have your employees received the required health and safety training and retraining? Yes No

Contractor Prequalification Form (PQF)

45. Training Records:

- Do you have health and safety, and crafts training records for your employees? Yes No
- Do the training records include the following:
 - Date of Training? Yes No
 - Employee Identification? Yes No
 - Method Used to Verify Understanding? Yes No
 - Name of Trainer? Yes No
- How do you verify understanding of the training?
(Check all that apply)
 - Job Monitoring
 - Oral Test
 - Performance Test
 - Written Test
 - Other (List) _____

INFORMATION SUBMITTAL

Please provide copies of checked (√) items with the completed contractor's PQF:

- _____ Accident/Incident Investigation Procedure.
- _____ Example of Employee Health and Safety Training Records.
- _____ Health and Safety Audit Procedure or Form.
- _____ Health and Safety Incentive Program.
- _____ Health and Safety Inspection Form.
- _____ Health and Safety Orientation Outline.
- _____ Health and Safety Program.
- _____ Health and Safety Training for Supervisors (Outline).
- _____ Health and Safety Training Program (Outline).
- _____ Health and Safety Training Schedule (Sample).
- _____ Housekeeping Policy.
- _____ Respiratory Protection Program.
- _____ Substance Abuse Program.
- _____ Unsafe Conditions Reporting Procedure.
- _____ WHMIS Program.

Note: Owner checks items to be provided with the contractor's PQF.

Individual to contact for clarification or additional information:

Name: _____ Telephone: _____
FAX: _____

OWNER'S USE ONLY

DO NOT FILL OUT - OWNER'S USE ONLY

- Contractor is: Acceptable for Approved Contractors' List.
 Conditionally acceptable for Approved Contractors List.

Conditions: _____

Reviewed By: _____ Date: _____

APPENDIX B

Sample

Covering Letter for the Contractor Prequalification Form (PQF)

Purpose

This appendix provides a sample covering letter for the Contractor Prequalification Form (PQF) that highlights an owner's safety requirements and objectives.

The letter may be modified to highlight your facility's or company's minimum criteria for an approved contractor.

When to Use

To accompany the Contractor Prequalification Form (PQF).

Who Uses

An owner.

Section Reference: 3.1

Covering Letter for the Contractor Prequalification Form (PQF)

Date

Company A,B,C
Contractor

Dear:

Subject: Contractor Prequalification Form (PQF)

Company X, Y, Z is committed to providing a safe and healthy place for employees, contractors and neighbors. Only a contractor who has demonstrated management leadership and systems resulting in superior health and safety performance is added to the approved contractors' list.

Please complete the Contractor Prequalification Form and return it as instructed if you wish to be included on our approved contractors' list.

To qualify to perform on site work for Company X, Y, Z, a contractor must:

- Have a documented Health, Safety and Environmental Program that meets legislated requirements applicable to his/her work.
- Have a program for compliance with PSM requirements on contracts. (Note: Only for covered processes.)
- Have a Substance Abuse Policy.
- Have a Worker's Compensation Rating equal to or less than the following: *(To be added by the company.)*
- Have an Injury Frequency Rate equal to or less than the following: *(To be added by the company.)*
- Agree that any subcontractors utilized will meet the requirements listed above.

If assistance is needed in completing this form, please contact:

Name:
Address:
Telephone Number:
FAX Number:

Failure to complete and return the Contractor Prequalification Form may result in you being excluded from performing work at our facility.

Sincerely,

Company X, Y, Z

APPENDIX C

Sample

Contractor Prequalification Evaluation Form

Purpose

This appendix illustrates a method for evaluating the Prequalification Form (PQF) submitted by a contractor.

When to Use

The evaluation method should be undertaken only after the evaluation criteria have been modified, based on the facility or the company criteria.

Who Uses

An owner.

Section Reference: 3.2.1

Page: 11

Contractor Prequalification Evaluation Form

Safety and Health Performance	Acceptable	Needs Improvement
Citations	<input type="checkbox"/>	<input type="checkbox"/>
Lost Days Away from Work Rate	<input type="checkbox"/>	<input type="checkbox"/>
Recordables	<input type="checkbox"/>	<input type="checkbox"/>
WCB Rate	<input type="checkbox"/>	<input type="checkbox"/>
Health and Safety Program	Acceptable	Needs Improvement
Inspections	<input type="checkbox"/>	<input type="checkbox"/>
PSM Compliance Program	<input type="checkbox"/>	<input type="checkbox"/>
Safety Commitment	<input type="checkbox"/>	<input type="checkbox"/>
Safety Meetings	<input type="checkbox"/>	<input type="checkbox"/>
Safety Orientation Program - New Hires	<input type="checkbox"/>	<input type="checkbox"/>
Safety Orientation Program - Supervisors	<input type="checkbox"/>	<input type="checkbox"/>
Safety Procedures	<input type="checkbox"/>	<input type="checkbox"/>
Safety Program	<input type="checkbox"/>	<input type="checkbox"/>
Safety Staff	<input type="checkbox"/>	<input type="checkbox"/>
Substance Abuse	<input type="checkbox"/>	<input type="checkbox"/>
The contractor should be added to the approved contractors' list.	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Feedback provided by the contractor on: _____		

Reviewed By:

—

Date:

—

APPENDIX D

Sample

Training Matrix Outline

Purpose

This appendix provides a potential list of training courses for different types of work.

A company or facility may want to review this material and modify it to suit its needs.

When to Use

To establish training requirements for work.

Who Uses

An owner.

Section Reference: 4.1.1
Page: 13

Training Matrix Outline

COURSES	TYPES OF WORK				
	Construction, Maintenance, and Operational Personnel in Process Units	Operation Support	Distribution	Administrative / Technical	Site
Confined Space Entry	X	X			
Crane Operations	X	X			
Electrical Safety	X				
Emergency Procedures	X	X	X	X	
Forklift Operations	X	X	X		
Hazard Communication	X	X	X	X	
Hearing Conservation	X	X	X		
Industrial Hygiene	X	X	X		
Lockout/Tag Out Procedures	X	X	X		
Medical and First Aid	X	X	X	X	
Office Safety Fire Extinguishers				X	
One-Hour Fire Training	X	X	X		
Personal Protective Equipment	X	X	X	X	
Rigging Safety	X				

APPENDIX E

Sample

Site Visit Checklist

Purpose

This appendix provides a sample list of questions an owner and a contractor may wish to use during a prebid or prejob site visit.

When to Use

During site visits.

Who Uses

An owner and a contractor.

Section Reference: 5.1

Page: 17

Site Visit Checklist

Contract No:

Date:

	Yes	N o	N/ A
1. Access to the project and the work area.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Available communications set up for on the job and external to the job.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Capacity, details, and location of an owner's furnished compressed air, fuel, power, and water.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. Contractor's laydown area(s).	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. Contractor's participation in owner's safety and first aid programs.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. Full scope of the project, and the facilities yet to be performed, that will have an influence on the work of the contract being bid upon.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. Location of disposal areas for cleanup purposes, and cleanup areas where more than one contractor is working.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. Material handling equipment and procedures	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9. Other work which will, or may be, in progress during the term of the contract.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10. Owner's/Contractor's furnished facilities, and schedule for availability (e.g., camp, contractor's responsibility for loading, delivery of construction materials or equipment on site, storing of owner's/ contractor's furnished materials, unloading, warehousing).	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11. Owner's furnished permits and contractor's furnished permits.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12. Point out access roads, borrow pits, building sites, and other important site features.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13. Scope of work for the contract, and any unusual or difficult operations that may be required.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
14. Site conditions under which the work will have to be performed.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
15. Site investigation program (i.e., borings, borrow pits, quarries, samples, test pits).	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
16. Work of a similar nature, if underway on the site, to show the required standard of workmanship.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Reviewed By:

xc: Owner's Contract File

APPENDIX F

Sample

Contractor's Monthly Statistical Data Report

Purpose

This appendix provides a sample statistical data report for an owner's and a contractor's use.

This form may be modified to suit individual company requirements.

When to Use

Monthly, for reporting health and safety statistics.

Who Uses

A contractor.

Section Reference: 6.1

Page: 20

Contractor's Monthly Statistical Data Report

Submission of this report is required by ALL contractors performing work at this facility.

Submit a separate report for each contract, each month, regardless of whether or not an injury occurred (if no man hours or mileage, please indicate "None").

Contractor _____

Contract Number _____

Contract Representative _____

Month _____

- Fires _____
- Government inspections _____
- Spills or releases of hazardous materials _____
- Total **first aids** for the month _____
- Total **lost workday cases** for the month _____
- Total **lost workdays** for the month _____
- Total **personnel hours worked** for the month _____
- Total **vehicle miles** driven for the month _____

Submitted By: _____

Date Submitted: _____

APPENDIX G

Sample

Job Site Inspection Checklist

Purpose

This appendix provides a checklist which may be used by both an owner and a contractor to document inspections of the job site while the work is in progress.

This checklist may be modified to suit individual company requirements.

When to Use

When conducting job site inspections.

Who Uses

An owner and a contractor.

Section Reference: 6.2.1, 6.2.2

Page: 20

Job Site Inspection Checklist

S Satisfactory
 NS Not Satisfactory
 NA Not Applicable
 CP Client Provided

Item	S	NS	NA	CP
1. <u>Accident Prevention Signs and Tags</u>				
All signs and tags in accordance with standard specifications.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Caution signs provided and used to warn against potential hazards or to caution against unsafe practices.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Danger signs provided and used only where there are immediate hazards.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Safety instruction signs provided and used for general instructions and suggestions.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Signs removed promptly when danger or hazards no longer exist.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> <input type="checkbox"/>				
2. <u>Barricades</u>				
Protective barricades (i.e., cable rope, wooden posts and rail, etc.) that warn as well as protect personnel provided and used.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Warning barricades (i.e., high-visibility synthetic tape or yellow pipe on posts, etc.) that alert personnel to a hazard provided and used.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. <u>Bulletin Boards</u>				
Displays changed regularly.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Neat and attractive.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Provided in strategic locations.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Well illuminated.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. <u>Cableways and Conveyors</u>				
Adequate ladders, lighting, and walkways provided, and kept in good order.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Aisles, conveyor crossover, etc. marked by suitable signs.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Conveyor systems equipped with audible warning signals and emergency stop switch.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Good housekeeping used.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Properly inspected and maintained.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Suitable guards where needed.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. <u>Combustible and Flammable Liquids</u>				
All containers clearly marked to show the contents (cans, drums, fuel tanks, gas cylinders, etc.).	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Drums and tanks used for outdoor dispensing and fueling purposes are:				
Dikes and drainage provided for spills.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

- Grounded and equipped with self-venting bungs and self-closing faucets.
- Identified and restricted from smoking or other heat sources:
"No Smoking" signs posted.
- Located at least 7.6 metres from buildings and work areas.
- Protected from traffic and kept free of weeds, debris, etc.
- Engines of vehicles and other combustion equipment shut off when being fueled.

Job Site Inspection Checklist

S Satisfactory
 NS Not Satisfactory
 NA Not Applicable
 CP Client Provided

Item	S	NS	NA	CP
Proper storage practices observed:				
Approved cabinet for indoor storage of liquids in excess of 113.6, and not more than 545.5 litres storage.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Fire hazard checked.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Sign labeled "Flammable - Keep Fire Away" posted on cabinet.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> <input type="checkbox"/>				
Storage areas enclosed or protected from heat and mobile equipment exposure.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Sufficient fire extinguishers.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
UL-approved safety cans used for 4.5 to 22.7 litres of flammable liquids.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. <u>Compressed Air</u>				
All compressed air equipment used for cleaning purposes regulated at 30 psi or less; chip guarding and proper Personal Protective Equipment provided.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. <u>Concrete Construction</u>				
Adequate runways, walkways guarded, etc.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Adequate shoring used, plumbed and crossed braced.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Boots, hard hats, gloves, goggles and respirators provided for protection from cement dust.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Employees wear full clothing, long-sleeved shirts, serviceable shoes.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> <input type="checkbox"/>				
Forms properly installed and braced.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Good housekeeping and safe hoisting and scaffolding practices observed.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Heating devices checked, necessary permits obtained.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Mixing and transport equipment supported, and traffic planned and routed.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Proper curing period and procedures observed.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Protruding nails and stripped form material removed from area.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>				
Shoring remains in place until strength is attained.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. <u>Cranes, Derricks, and Hoists</u>				
All equipment properly lubricated and maintained.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Area barricaded or roped off where necessary.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Cables and sheaves free of excessive wear and abrasions.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Equipment equipped with portable fire extinguisher (5 BC rated).	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> <input type="checkbox"/>				
Equipment firmly supported.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Illustration of crane hand signals posted, understood, and observed.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> <input type="checkbox"/>				

- Oiler's and operation's inspection checklist maintained.
- Outriggers used if needed.
- Power lines inactivated, removed or at safe distances as required by provincial regulations.
- Proper loading for capacity at lift radius.
- Rated load capacities and operating instructions posted and visible to the operator.
- Signalmen where needed.
- Slings and chains, hooks and eyes, have no evidence of damage, defects, or excessive wear.
- Tag lines used on swinging loads.

Job Site Inspection Checklist

S Satisfactory
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Item	S	NS	NA	CP
9. <u>Cutting and Welding Operations</u>				
Adequate lighting and ventilation provided.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Cylinders safely located or protected from exposure to sparks and slag, and:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Capped when not in use.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Firmly secured upright.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Moved on carts.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Removed from work area to storage when empty.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Safely handled and transported.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Cylinders Storage:				
All burning torches bled and free of oxygen and acetylene and/ or other gases during lunch breaks or other extended periods of time.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
All cylinders clearly marked and identified.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Location at least 100 metres from work areas and unrelated combustible material.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Platforms in good repair and marked for full and empty cylinders.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> <input type="checkbox"/> "Danger - No Smoking, Matches or Open Lights" signs posted where required.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Dry chemical fire extinguisher within 136.3 metres.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Electrical equipment grounded.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Employees wear sufficient clothing and Personal Protective Equipment.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Equipment checked before use to ensure operative condition.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Exposed combustible materials removed to safe location or properly protected from sparks and slag.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Gas lines protected and in good condition.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Good housekeeping and safe scaffolding practices maintained.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Machines turned off at end of shift, or when not in use for extended periods.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Performed by qualified personnel.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Power cables and gas lines properly located to prevent tripping and falling hazards.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Power cables protected and in good repair.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Screens, shields, or eye protection provided and used to protect employees from welding operations.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Valid hot work permit required and provided.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

10. Demolition Work

Adequate lighting and ventilation provided where necessary.

- | | | | | |
|---|--------------------------|--------------------------|--------------------------|--------------------------|
| Adequate safe access provided. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Adjacent structures shored or braced. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Area roped or barricaded. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Clear operating space provided for equipment and vehicles. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| <input type="checkbox"/> | | | | |
| Electrical, sewer, steam lines and water cut off, locked out, or tagged. | | | | <input type="checkbox"/> |
| <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> | | | | |
| Full clothing, serviceable shoes, and adequate Personnel Protective Equipment (ear plugs or muffs, hard hats, gloves, goggles, respirators, safety belts, etc.) provided. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Material chutes used. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Operations planned ahead. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Overhead protection provided where required. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

Job Site Inspection Checklist

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Proper danger, safety, and warning signs provided and used. <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Proper fire extinguishing equipment in place.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Regular supervision maintained.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Safe housekeeping, rigging, scaffolding, and welding practices observed.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Safety work permit required and necessary blinding of lines, etc. accomplished.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

11. Electrical Installations

All weatherproof boxes with fixed and portable electrical service equipment kept closed and:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Adequate, well-insulated wiring provided.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Electrical dangers posted and guarded.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Flexible cords or cables used only in continuous lengths without splice or tap.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Lockout or tag out system used.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Nonconducting elevated platform or rubber mat provided to protect the employee operating switches from contact with the damp floor or earth.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Protected from exposure to combustible materials, traffic, and the weather.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Rigidly mounted on a panel or frame and properly marked with all switches; circuit breakers, etc. clearly marked to identify the voltage and purpose; switches indicate whether open or closed.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Worn, frayed or spliced cables and cords tagged and removed from service.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Cables and cords protected against accidental damage and kept clear of work spaces, walkways, etc. to prevent tripping or falling hazards.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Fire hazards checked, proper extinguishers available.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Power tools, portable tools, electrical equipment, fans, water cooler, etc., extension cords, three-wire type and three-prong plugs in good condition.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Temporary lights equipped with guards and heavy duty cords and maintained in a safe condition.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

12. Employee Training

Employees instructed to promptly report injury, illness, and accidents involving damage to equipment and materials. <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Employees instructed to report unsafe or hazardous conditions to proper job supervisor.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

- Safety indoctrination held for new employees.
- Sufficient instruction given to recognize and avoid job hazards, unsafe conditions, and job rules, regulations, and procedures.
- Sufficient instruction in the proper use and maintenance of tools, equipment, and Personal Protective Equipment.

Job Site Inspection Checklist

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Item	S	NS	NA	CP
13. <u>Equipment Upkeep</u>				
Adequate equipment records kept.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Planned inspection and maintenance program used.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Proper fuels, lubricants, and oils used.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
14. <u>Excavation, Shoring, and Trenching</u>				
Adequate barriers and lighting provided at night where required.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Adjacent structures shored.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Atmospheric conditions tested where necessary.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Banks more than 1.5 metres shored or sloped to angle of repose.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Boots, full clothing, gloves, goggles, hard hats, respirators, and serviceable shoes provided as needed.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Equipment at safe distance from the edge.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Equipment ramps adequate, slope not too steep.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Frequent inspections made.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Land shored and sheared as needed for depth and soil.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Materials at least one metre away from the edge of excavations.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Prior installation, gas lines, conduit, etc. located.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Roads and sidewalks supported and protected.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Water controlled.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
15. <u>Fire Prevention and Protection</u>				
Ashtrays or sand pails provided in offices and other areas where smoking is permitted.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Extinguishers conspicuously located or properly mounted in:				
Flammable liquid and fuel dispensing areas.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Office and change areas.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Shops and outside storage areas.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Vehicles and heavy mobile equipment.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Warehouse and tool rooms.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Welding and burning areas.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other strategic locations, as required.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Fire department phone number posted.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Fire extinguishers inspected monthly to ascertain:				
Durable tag shows the annual maintenance or the recharge and the initials of person performing the service.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Obvious physical damage, corrosion, or other impairment.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Replacement extinguishers properly stored.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Seal intact, not broken.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Fire plan and emergency alarm system, signals and instructions				

posted.
"No Smoking" signs posted and enforced where necessary.

Sufficient fire extinguishers available, fully charged, and operable.

Supervisors, foremen, and other key employees trained in the
proper use of extinguishers and client fire fighting equipment.

16. First Aid and Medical

Accident reports prepared by the foreman, reviewed by the
supervisors, and signed by the job superintendents.
Accidents investigated and properly followed up to prevent
recurrence.

Job Site Inspection Checklist

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All injuries and illnesses reported and logged.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Company, workers' compensation, and accident reports and logs prepared and submitted promptly as required.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
First aid administered by a person with a valid certificate.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
First aid facility neat and sanitary.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
First aid kit and supplies maintained.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Vehicle available in good condition for emergency use.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

17. Floor and Wall Openings - Guards

All floor openings covered or guarded by the standard railing and toe board.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
All open-sided floors, walkways, platforms, ramps, and runways with a drop of more than 3.5 metres guarded with the extended railing and toe board as required.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
All stairs with four or more risers provided with railings.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Floor coverings built to the equivalent of an evenly distributed load of 2.4 kilonewtons per square metre.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Railing, posts, and wall opening barriers able to withstand a force of at least 200 pounds.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Screens used between the board top rail where needed to prevent material from falling.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Wall openings guarded as required.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

18. Garages and Repair Shops

Adequate lighting and ventilation provided.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Battery charging operations follow safe procedures.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Carbon monoxide dangers checked.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Dispensing of fuels and lubricants checked.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Fire extinguishing equipment and "No Smoking" signs provided.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>				
Fire hazards checked.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Good housekeeping and proper waste containers provided and used.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

19. Hand Tools

All wrenches checked for wear and defects to prevent slippage.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>				
Company and employee personal tools inspected and maintained.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> <input type="checkbox"/>				
Damaged or defective tools tagged and taken out of service.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>				
Impact tools, hammers, drift pins, wedges, chisels, etc. kept free of mushroomed heads.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Proper tool used for each job.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Tools neatly stored, carried safely.
Wooden handles of tools kept tight and free of splinters or cracks.

20. Heavy Equipment

Fire extinguishers (5 BC rated) provided.
If required, equipped with seat belts.
Lights, brakes, warning signals operative.
Moving parts lubricated and repaired.
Protection when equipment is not in use.
Regularly inspected and maintained.
Wheels chocked when necessary.

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21. <u>Housekeeping and Sanitation</u>				
Adequate lighting and ventilation provided.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Covered metal containers, clearly marked for the disposal of oily rags and other flammable caustics, chemicals, toxic waste and materials, provided and used.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Drinking containers sanitary, tightly capped, clearly marked for use, cup dispensers provided.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
General neatness of the:				
Company employee vehicle parking areas.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Office facilities.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Outdoor storage areas.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Shop facilities.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Warehouse and tool rooms.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Working areas.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Lunchroom or facility separated from possible exposure to toxic fumes and materials, etc.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Metal containers provided for waste, used paper cups, scrap and debris.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Passageways, stairs, walkways, roads, and fire ways kept clear.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Protecting rails, wire, bolts, etc. removed.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Wash, toilet, change, and lunch facilities adequate and clean.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Waste, debris, and scrap material regularly discarded.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Work area surfaces and benches not cluttered, oil and grease removed.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
22. <u>Masonry Work</u>				
<input type="checkbox"/> Dust respirators, eye and face protection, and hard hats provided.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Good housekeeping and rigging practices observed.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Masonry saws properly equipped.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Proper scaffolding erected.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
23. <u>Material Handling and Storage</u>				
<input type="checkbox"/> Combustibles, flammable, and other unrelated materials separated and clearly identified.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Employees using proper lifting methods, picking up load correctly.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Extinguishers or other fire protection available.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Dust protection observed.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Lifting weights known before handling.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Materials spotted to minimize rehandling and reduce transport	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

distances.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Neat storage area, clear passageways.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
"No Smoking" signs posted where necessary.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Power equipment used to handle heavy or awkward loads.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Proper number of employees for each operation, physically suited for task.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Protection provided against falling hazards.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Protruding nails and wires removed and rugged metal edges protected before material is handled.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Safe loading limits observed for indoor storage.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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Stacks on firm footing and all tier-stacked materials secured against sudden movement.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Storage platforms, skids, bins, shelves, etc. in good repair.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Tag lines used to control loads.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
24. <u>Minimum Posting Requirements</u>				
Client - general safety rules.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Company - emergency medical service posters.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Fire alarm and emergency evacuation instructions.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Job safety rules and regulations.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Miscellaneous - safety bulletins, safety reminder posters, and general company information.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Provincial workers' compensation posters.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
25. <u>Motor Vehicles</u>				
All vehicles equipped with seat belts.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Brakes, lights, warning devices operative.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Driven by qualified operators with valid licenses.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Equipment and tools secured when trucks transport personnel.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>				
Load sizes and weight limits controlled.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Personnel carried in a safe manner.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Provincial vehicle laws and regulations (including plant) followed.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> <input type="checkbox"/>				
Regularly inspected and maintained.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Safe entrance and exit provided on trucks used to transport personnel.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Vehicles not left running unattended.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
26. <u>Occupational Noise Exposure</u>				
Approved and effective ear protection provided to employees working in areas that exceed permissible noise levels.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Controls established to prevent overexposure to noise.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Employee records maintained.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Noise level areas of 85 dBA as per noise regulations, and above, identified.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Signs notifying personnel of "Hearing Protection Required" posted as required.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Studies made to determine the feasible controls for reducing the noise in the high level areas.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
27. <u>Personal Protective Equipment (PPE)</u>				
Ear protection provided where required.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Hard hats worn by everyone.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Proper eye and face protection used.
Proper respiratory protection used.
Protective clothing worn as required.
Sufficient equipment provided, used, and maintained.

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Job Site Inspection Checklist

S Satisfactory
 NS Not Satisfactory
 NA Not Applicable
 CP Client Provided

Item	S	NS	NA	CP
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28. Portable Ladders (Extension, Step, and Straight)

- | | | | | |
|--|--------------------------|--------------------------|--------------------------|--------------------------|
| All straight and extension ladders equipped with safety shoes and/or blocked off in use. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Defective ladders tagged and removed from work area. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Inspected and in good condition. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Ladder areas barricaded where required. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Ladders properly maintained and stored. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Metal ladders not used around electrical hazards. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Properly secured top and bottom. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Rails extend at least one metre above landing or work platform. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| <input type="checkbox"/> | | | | |
| Step ladders fully open when in use. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Stock ladders not spliced. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

29. Power Actuated Tools

- | | | | | |
|--|--------------------------|--------------------------|--------------------------|--------------------------|
| All operators qualified. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Competent instruction and supervision provided. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Flying hazards checked by backing up, removal of personnel, or use of captive stud tool. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Local laws and ordinances complied with. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Proper permit obtained for use. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Safety goggles or face shields provided. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Tools and charges protected from unauthorized use. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Tools checked and in good working order. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Tools not used on any but recommended materials. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

30. Power Tools

- | | | | | |
|--|--------------------------|--------------------------|--------------------------|--------------------------|
| All tools equipped with required mechanical guards. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Electric tools properly grounded. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Extension cords are the three-wire type. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Damaged or defective tools tagged and removed from the work area. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| <input type="checkbox"/> <input type="checkbox"/> | | | | |
| Fluid used in hydraulic powered tools is fire-resistant. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Frequent inspections made. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Fuel powered tools stopped while being refueled, maintained, and serviced. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Hand-held tools equipped with constant pressure switch. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Proper Personnel Protective Equipment provided and used. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| <input type="checkbox"/> | | | | |
| Right tool used for the job. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Tools and cords in good condition. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Tools neatly stored when not in use. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Working areas kept neat. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

31. Safety Committee

- | | | | | |
|--|--------------------------|--------------------------|--------------------------|--------------------------|
| Effective meeting agenda and format prepared. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Foreman's tool box safety meetings held weekly. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Meeting minutes filed and distributed as required. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Safety committee effective. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Safety committee meetings held monthly. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Safety meetings attended by supervisors, trades foremen,
stewards, subcontractors, and employees. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Special safety meetings held when necessary. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

Job Site Inspection Checklist

S Satisfactory
 NS Not Satisfactory
 NA Not Applicable
 CP Client Provided

Item	S	NS	NA	CP
32. Scaffolding				
Access ladder or safety equivalent provided and used.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
All connections adequate, pins and crossbracing provided, and support plumb.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
All structural members adequate for use.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Complete platform, planks, close together, secured by wire and proper cleating.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Defective and damaged parts, planks, etc. removed from service.			<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> <input type="checkbox"/>				
Erected under proper supervision.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Frequent inspections made.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Guard rails, midrails, and toe boards installed on all open sides of platforms 3.5 metres.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ladders and working areas kept free of chemicals, debris, grease, ice, and snow.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Proper footings--sound, rigid, and secured--provided.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Safely tied into structure.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
33. Steel Erection				
Eye protection, full clothing, gloves, hard hats, safety belts, and serviceable shoes used.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Fire hazards checked at rivet force and welding operations.		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>				
Good housekeeping, rigging, and welding practices observed.		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>				
Hoisting apparatus checked.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ladders, stairs, or other safe access provided.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Safety nets used if required.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Tag lines used for hoisting tools and material.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
34. Temporary Heaters				
Equipment with pilot and automatic shutoff valve to prevent flow to fuel if flame goes out.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Frequently checked to ascertain safe condition and clearance from combustible and flammable material.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Installed, serviced, and relocated only by authorized employees.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>				
Sufficiently ventilated.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

APPENDIX H

Sample

Contractor's Health and Safety Performance

Evaluation Form

Purpose

This appendix illustrates a method for evaluating a contractor's health and safety performance on a periodic basis, or at the completion of the work.

When to Use

When evaluating the performance of a contractor, generally annually.

Who Uses

An owner.

Section Reference: 7.1

Page: 22

Contractor's Health and Safety Performance Evaluation Form

Contractor: _____ Job Title: _____

Contract No: _____ Location: _____

Date Completed: _____ Evaluated By: _____

Project Description: _____

Type of Contract (*Circle One*) Maintenance Repairs Construction Special Repairs Other _____

<i>Rate Applicable Categories</i>	POOR EXCELLENT (<i>Circle One</i>)									
SAFETY										
1. Adherence to Site Safety Rules	1	2	3	4	5	6	7	8	9	10
2. Housekeeping	1	2	3	4	5	6	7	8	9	10
3. Injury Performance	1	2	3	4	5	6	7	8	9	10
4. Safety Programs	1	2	3	4	5	6	7	8	9	10
OPERATIONS										
5. Cost Within Expectations	1	2	3	4	5	6	7	8	9	10
6. Equipment	1	2	3	4	5	6	7	8	9	10
7. Execution of Work	1	2	3	4	5	6	7	8	9	10
8. Key Field Personnel	1	2	3	4	5	6	7	8	9	10
9. Labor Relations	1	2	3	4	5	6	7	8	9	10
10. Project Manager	1	2	3	4	5	6	7	8	9	10
11. Quality of Craft Labour	1	2	3	4	5	6	7	8	9	10
12. Schedule	1	2	3	4	5	6	7	8	9	10
13. Service	1	2	3	4	5	6	7	8	9	10
14. Overall General Performance	1	2	3	4	5	6	7	8	9	10

NO
YES

(Circle One)

Do you recommend contractor
for further XXXXX work?

1 2 3 4 5 6 7 8 9 10

Comments:

Contractor's Health and Safety Performance Evaluation Form

Contractor:			
HAZARD CONTROL	Acceptable	Needs Improvement	NA
1. General Hazard Control	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Housekeeping	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Machine Guarding	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. Maintenance of Equipment, Guards, Tools, etc.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. Personal Protective Equipment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. Work Permit System	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
FIRE CONTROL AND INDUSTRIAL HYGIENE	Acceptable	Needs Improvement	NA
1. Chemical Hazard Control	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Fire Control Measures	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Flammable and Explosive Materials Control	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. Waste - Trash Collection	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
SAFETY PROGRAM	Acceptable	Needs Improvement	NA
1. Accident Investigation/Reporting	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Emergency Drills	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Indoctrination of New Employees	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. Safety Inspections	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. Safety Meetings	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. Safety Promotion	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. Supervisors'/Employees' Safety Communications	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. Supervisor's Safety Training	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
SAFETY PERFORMANCE	Additional Comments:		

1. Number of Equipment Damage Reports _____	_____
2. Number of First Aid Injuries _____	_____ _____ _____
3. Number of Incidents of Regulatory Noncompliance _____	_____ _____ _____
4. Number of Lost Time Injuries _____	Evaluated By: _____ Title: _____ Date: _____

Contractor's Evaluation Definitions

1. Adherence to Site Safety Rules

Adherence to contract provisions for new hire orientation.
Compliance to plant safety rules.
Compliance with industrial hygiene requirements.
Compliance with site contractor's health and safety guidelines.
Compliance with site permits.
Material Safety Data Sheets (MSDS) requirements.
Response to safety requests.

2. Cost Within Expectations

Contractor's cost program.
Contractor's reasonableness in extra charges.

3. Equipment

Availability of tools and equipment furnished.
Condition of contractor's tools and equipment by site and Alberta Labour OH&S standards.
Contractor's knowledge and proper use of equipment.

4. Execution of Work

Contractor's cooperation in handling change orders.
Contractor's efforts to eliminate nonproductive time.
Contractor's planning of work.
Relationship with other site contractors.

5. Housekeeping

Monthly housekeeping inspection results.
Overall site housekeeping practices.
Response to housekeeping requests.

6. Injury Performance

Contractor's participation in accident investigations.
Contractor's prequalification status.
Number of incidents observed and reported.

7. **Key Field Personnel**

Competence of main office staff and management.
Quality of first- and second-line supervision.

Contractor's Evaluation Definitions

8. Labour Relations

Contractor's ability to anticipate problems.
Contractor's efforts in exercising management rights.
Contractor's relationship with building trades.

9. Overall General Performance

Did the contractor complete the work?
Did the contractor file liens against the owner?
Did the contractor start and complete work when we wanted?
Were there liens against the contractor?

10. Project Management

Contractor's efforts to use efficient crew size.
Control of subcontractors.

11. Quality of Craft Labour

Contractor's ability to obtain qualified personnel.
Contractor's field personnel.
Workmanship.

12. Safety Programs

On site safety officer.
Safety training for supervisors.
Substance abuse program/testing in place.
Weekly toolbox meetings and/or participation.
Written safety program.

13. Schedule

Contractor's adherence to schedule requirements.
Contractor's scheduling techniques.

14. Service

Advise of potential problems.
Efficiency in handling paperwork.

Readiness to accept responsibility.
Reliability in dealings.
Response to site requests for action by the field supervisor, at home office management.

APPENDIX I

Sample

Contractor's Health and Safety Policy Statement

Purpose

This appendix provides a sample contractor's health and safety policy statement.

This policy statement can be modified for your facility.

When to Use

To establish top management's commitment to a contractor's health and safety.

Who Uses

An owner.

Section Reference: 8.2
Page: 23

Contractor's Health and Safety Policy Statement

This policy establishes the requirements for the contract administration of a contractor's health and safety activities at an owner's facility.

Implementation of this policy is consistent with the company's continuing commitment to health, safety, and the protection of the environment.

The contractor's health and safety policy has the following purposes:

- To approve only qualified and safe contractors.
- To enhance existing procedures for bidding, evaluating, and awarding contracts.
- To establish an understanding of the minimum requirements expected and required of a contractor.
- To formalize training and communications programs to provide adequate instruction and coordination prior to, and during, the job.
- To formally establish the specific elements of a contractor's health and safety management program to enhance the overall safety of a contractor's personnel and an owner's employees and property.
- To incorporate formal audit procedures to monitor and evaluate a contractor's performance.
- To set forth security requirements to exclude contract companies and contract employees who have been expelled for reasons of poor safety performance or inadequate qualifications.

A contractor is expected to provide his/her employees with a level of health and safety protection equivalent to what is provided to the owner's employees. Strong, consistent management of all elements associated with contract work and services will enhance the health and safety protection provided to our employees, our contractors and our neighbors.

If you have any questions regarding this policy or its implementation, please contact:

Name: _____

Title: _____

APPENDIX J

Sample

Owner's Written Contractor's Health and Safety Management Program

Purpose

This appendix is a sample of an owner's written contractor's health and safety management program.

When to Use

To establish a contractor's health and safety management program and procedures.

Who Uses

An owner.

Section Reference: 8.3

Page: 23

Owner's Written Contractor's Health and Safety Management Program

Contractor Safety	Standard No: Page: 1 of 6 Revision: 0 Issue Date: August 1, 1995
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1.0 Field/Scope of Application

1.1 Field of Application

This standard applies to all facilities owned and/or operated by _____.

1.2 Scope of Application

This standard defines the management systems that must be in place to protect and promote the health and safety of a contractor working for _____.

2.0 Definitions

2.1 Contractor

A general contractor, a self-employed contractor, and a subcontractor (general or self-employed) working on construction, maintenance/repair, major renovation, specialty services, or turnarounds, or in or around laboratories, pipelines, process equipment, terminals and utilities.

Note: It does not apply to a contractor providing incidental services, e.g., food and drink services, janitorial work, etc., or to a contractor with less than 10 employees.

2.2 Prime Contractor

A contractor given the contract by _____ to perform work.

3.0 FORMS

3.1 Sample Evaluation Checklists.

4.0 Program Requirements

4.1 Commitment

Continuous improvement in a contractor's health and safety performance is achieved by establishing and implementing the appropriate management

programs for both XXXXX and a contractor. A contractor is ultimately responsible for the safety of his/her employees.

4.1.1 A contractor is informed during inquiry about XXXXX's health and safety requirements.

As a minimum, these requirements include programs focusing on:

- Contractor's employee training.
- Contractor's employees'/contract management's communications.
- Health and safety while working for XXXXX.
- Monitoring and auditing.

Owner's Written Contractor's Health and Safety Management Program

Contractor Safety	Standard No: Page: 2 of 6 Revision: 0 Issue Date: August 1, 1995
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4.1.2 Contracts contain all job specific health and safety requirements, for example, an asbestos contractor to supply all Personal Protective Equipment (PPE).

4.1.3 Open lines of communication are established with a contractor's supervisors to ensure safe work practices prior to starting the actual work.

4.1.4 Procedures exist to prevent a contractor from working at all locations, should he/she disregard or ignore health and safety requirements.

4.2 Contractor's Selection

A contractor is evaluated on his/her past safety performance and on his/her actual safety programs prior to selection, in order to ensure he/she is qualified to work safely for XXXXX.

4.2.1 Evaluations should include:

- Accident Statistics/Incident Rates.
 - Employee Training and Documentation.
 - Fitness for Duty Policy.
 - Past Experience at
-
- Proper Health and Safety Documentation.
 - Safe Work Procedures.
 - Safety Programs.
 - WCB Experience.
 - WHMIS Program.

4.2.2 A record of the criteria used for a contractor's selection is kept on file by the facility issuing the agreement.

4.2.3 The evaluations of each contractor are filed in a designated place and are accessible.

4.3 Pework Criteria

Safety personnel ensure site specific health and safety requirements are prepared and communicated to a contractor while discussing job

requirements/performance. These requirements are used in the selection process, and reviewed with a contractor if the job scope changes.

4.3.1 A contractor is notified that the following requirements need to be completed before starting the job:

4.3.1.1 A contractor provides XXXXX with a copy of his/her written WHMIS Program.

Material Safety Data Sheets (MSDSs) are made available for any XXXXX's hazardous substances to which a contractor's employees may be exposed during the performance of their work. A contractor will supply Material Safety Data Sheets (MSDSs) for any substances he/she brings on site, to which any worker, contractor or XXXXX, may be exposed.

Owner's Written Contractor's Health and Safety Management Program

Contractor Safety	Standard No: Page: 3 of 6 Revision: 0 Issue Date: August 1, 1995
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4.3.1.2 A contractor's employees know how to perform their job tasks and understand the required XXXXX's safety rules and regulations prior to starting the job. Appropriate documentation of each employee's training is available.

4.3.1.3 A prime contractor provides a representative responsible for all safety information/activities for each job.

4.3.1.4 Prior to the start of a contractor's work, all the contractor's employees attend a safety orientation to assure understanding of the requirements in 4.3.1.5.

4.3.1.5 Prior to the start of a contractor's work, there is an initial safety meeting with a XXXXX's representative, a key contractor's management representative, and a contractor's safety representative.

This orientation should cover topics such as the:

- Appropriate communication lines between a contractor and a contractor's safety representative (a contractor is responsible for the safety of his/her personnel).
- Casual gathering of employees inside the work place area is not permitted.
- Emergency evacuation signals and routes.
- Facility safety requirements.
- Special hazards of the proposed work and work area.
- WHMIS Program briefing.

4.3.1.6 Where applicable, a contractor has emergency procedures which are consistent with, and approved by, XXXXX.

4.3.2 A copy of the written requirements and all addendums are kept with the contract on site.

4.4 Work Criteria

A contractor performs work according to establish work criteria.

Work criteria include:

4.4.1 A contractor reports an incident immediately to the XXXXX's representative and conducts a thorough investigation. Major incidents require a full investigation, including a root cause failure analysis. A copy of all incident reports and investigations are provided to the designated XXXXX's representative.

Owner's Written Contractor's Health and Safety Management Program

Contractor Safety	Standard No: Page: 4 of 6 Revision: 0 Issue Date: August 1, 1995
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- 4.4.1.1 A contractor submits a monthly summary of accident and work hours to the designated XXXXX's representative.
- 4.4.2 A contractor's employees frequently discuss health and safety issues, if appropriate, on a daily basis. A contractor's management will provide appropriate documentation.
- 4.4.3 A contractor's supervisor and XXXXX's management review safety performance periodically.
- 4.4.4 Where the hazards warrant, an industrial hygiene program for a contractor's employees is provided by a contractor's management to XXXXX's health and safety management.
- 4.4.5 Written work procedures, where applicable, are provided by a contractor for review by XXXXX to ensure consistency of application. If available, a contractor may use the site's procedures.

These include:

- Asbestos.
- Back Injury Prevention.
- Confined Space Entry.
- Driver Safety.
- Electrical Classification.
- Electrical Equipment Grounding.
- Electrical Man Way Entry.
- Emergency Egress.
- Emergency Evacuation and Response.
- Employee and Supervisory Safety Training.
- Equipment/Line Opening Permits/Procedures.
- Excavation/Trenching Permits/Procedures.
- Fall Protection.
- Fire Protection.
- Forklift Driver Safety (Where Appropriate).
- Hand Tools.
- Hearing Conservation.
- High Explosive Permits.
- Hot Tap Procedures/Permits.
- Housekeeping.

- Industrial Hygiene Monitoring.
- Laboratory Safety.
- Ladders, Man Lifts, Platforms, and Scaffolds.
- Lift Plans.
- Lockout/Tag Out.
- Mechanical Guarding.
- Office Safety.
- Personal Protective Equipment (PPE).
- Personnel Baskets.

Owner's Written Contractor's Health and Safety Management Program

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- Precaution for Population Control During Hazardous Operations.
- Precaution for Shutdown/Start-Up.
- Radiation.
- Railroad Safety.
- Random Drug Testing.
- Respiratory Protection.
- Road Barricades.
- Safety Work Order Procedures.
- Smoking.
- Vehicle Access into Controlled Areas.
- Walking and Working Surfaces.
- Waste Disposal Procedures.
- WHMIS.
- Work Permits, Including Hot Work.

4.4.6 XXXXX's safe work permits are completely prepared and signed before the work begins.

4.5 Monitoring a Contractor's Performance

A system is in place to regularly monitor and report the health and safety performance of a contractor for the duration of the contract.

4.5.1 Appropriate methods for monitoring by XXXXX personnel are established.

These may include the:

- Attendance at a contractor's safety meetings.
- Review of a contractor's safety reports and action plans.
- Review of record keeping practices and documentation.
- Unannounced work place reviews.

4.5.2 A contractor will conduct self-audits regarding his/her health and safety, and report the findings to the designated XXXXX representative.

4.5.3 A contractor will provide feedback regarding the status of all findings and recommendations.

4.5.4 Records of findings, recommendations and actions are kept on file.

4.6 Post Work

A program is in place to ensure information on a contractor's performance is available.

4.6.1 A contractor is evaluated on the performance of his/her subcontractors.

4.6.2 A report on the evaluation is written and filed upon completion of each job.

4.6.3 The extent of a contractor's evaluation is determined by the size and potential risks of the job.

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4.6.4 The report addresses the:

- Availability and use of safety equipment.
- Comparison of a contractor's performance to the safety objectives established for the job.
- Contractor's management's commitment to the program.
- Degree of compliance with safety procedures and rules.
- Effectiveness and promptness of conditions, corrections, practices, and procedures, when identified as potential hazards.
- Results of the annual or final illness and injury statistical report by the contractor.
- Safety communication effectiveness to the work force.
- Thoroughness of job planning in safety-related items.

4.6.5 This report is filed in a designated place and is easily accessible.

4.7 Exceptions

4.7.1 For a small contractor, some requirements may not apply. These include paragraphs:

- 4.3.1.1 Contractor's Written WHMIS Program.
- 4.3.1.3 Safety Representative for Each Job.
- 4.3.1.6 Written Emergency Procedures.
- 4.4.1.1 Monthly Injury/Illness Report.
- 4.4.2 Daily Safety Meetings.
- 4.4.3 Periodic Safety Performance Review.
- 4.4.5 Written Work Procedures.
- 4.5.2 Contractor's Self-Audit Program.
- 4.5.3 Feedback on Self-Audit Recommendations.
- 4.5.4 Findings, Recommendations on File.
- 4.6 Post Work Evaluation.

4.7.2 A procedure is in place to define the system for XXXXX to approve exceptions, and each exception is documented.

5.0 Reports and Record Keeping

5.1 Reports

5.1.1 A contractor's incident reports are provided and filed.

- 5.1.2 A contractor's health and safety performance monitoring reports are written and filed.
 - 5.1.3 The post work contractor's health and safety evaluation reports are written and filed.
 - 5.1.4 Approvals for exceptions, as designated in 4.7.2, are filed in a designated place and are easily accessible.
- 5.2 Record Keeping
- 5.2.1 A contractor's selection criteria is on file.
 - 5.2.2 All reports in 5.1 are kept in a central location.

APPENDIX K

Sample

Audit Protocol for an

Owner's Contractor's Health and Safety Management Program

Purpose

This appendix provides a sample audit protocol for an owner to audit a facility's contractor's health and safety program.

The audit protocol should be modified, based on the company's requirements for a contractor's health and safety management program.

When to Use

When auditing an owner's contractor's health and safety management program.

Who Uses
An owner.

Section Reference: 8.5
Page: 23

Audit Protocol for an Owner's Contractor's Health and Safety Management Program

Review Team Members: _____

Facility/Unit: _____ Date: _____

Results	Item Description	Observations
----------------	-------------------------	---------------------

Commitment

1. Do the contracts contain adequate job specific health and safety requirements?
2. Do XXXXX's safety representatives attend prebid conferences?
3. Does XXXXX have procedures to prevent a contractor from working at all locations should he/she consistently disregard or ignore health and safety requirements?

Audit Protocol for an Owner's Contractor's Health and Safety Management Program

Facility/Unit: _____

Date: _____

Results	Item Description	Observations
	<p><u>Contractor's Selection</u></p> <ol style="list-style-type: none"> 1. Is an evaluation of a contractor conducted prior to his/her selection? 2. Does a contractor's evaluation include: <ol style="list-style-type: none"> a) Accident incident/statistics rates? b) Employee training? c) Fitness for duty policy? d) Hazard communication program? e) Past experience at XXXXX? f) Past safety performance? g) Proper health and safety documentation? h) Safe work procedures? i) Safety programs? j) WCB premiums? 3. Is there a record of the criteria used for a contractor's selection on file? 4. Are the evaluations for each contractor on file? 5. Is a contractor removed from a qualified bidders' list if safety conformance is not acceptable? 6. Are there records which indicate a contractor has been removed from a qualified bidders' list? 7. How are the appropriate individuals responsible for hiring a contractor informed of a contractor being removed? 8. Are all appropriate individuals informed of which contractor has been removed from the qualified bidders' list? 	

Audit Protocol for an Owner's Contractor's Health and Safety Management Program

Facility/Unit: _____

Date: _____

Results	Item Description	Observations
	<p><u>Pework Criteria</u></p> <ol style="list-style-type: none"> 1. Do safety personnel ensure site specific and health requirements are prepared and used when discussing job requirements with a contractor? 2. Are copies of the written requirements and all addendums kept with the contract on site? 3. Do all a contractor's employees, including the key contractor's management representatives, receive a thorough site orientation before beginning work, which includes the: <ol style="list-style-type: none"> a) Appropriate communication lines between a contractor and XXXXX's representative have been established? b) Casual gatherings of employees inside the work place area are not permitted? c) Emergency evacuation signals and routes? d) Location safety requirements: <ul style="list-style-type: none"> - Incident reporting procedures? - Permitting of work activities? - Protective equipment requirements? - XXXXX's safety rules? e) Special hazards of the proposed work and areas (biological, chemical, physical)? 	

Audit Protocol for an Owner's Contractor's Health and Safety Management Program

Facility/Unit: _____

Date: _____

Results	Item Description	Observations
	<p>f) WHMIS briefing:</p> <ul style="list-style-type: none"> - Hazards of chemicals? - Hazards of processes? <p>4. Is there documentation that demonstrates a contractor's employees understand XXXXX's required safety rules and regulations prior to starting the job?</p> <p>5. Does the prime contractor provide a representative who is responsible for all safety activities/information?</p> <p>6. Has a contractor demonstrated his/her employees know how to perform their job tasks?</p> <p>7. Has a contractor provided documentation of employee training?</p> <p>8. Was the training documentation reviewed and determined to be adequate by XXXXX's personnel?</p> <p>a) Is there documentation as to whom determined the adequacy?</p> <p>9. Has a written WHMIS Program been provided by a contractor?</p> <p>10. Is there documentation XXXXX's personnel have reviewed and determined the program is adequate?</p> <p>a) Is there documentation as to whom determined the adequacy?</p>	

Audit Protocol for an Owner's Contractor's Health and Safety Management Program

Facility/Unit: _____

Date: _____

Results	Item Description	Observations
	<p>11. Are copies of the contractor's Material Safety Data Sheets (MSDSs) readily available to employees?</p> <p>12. Have written emergency procedures been provided by a contractor?</p> <p style="padding-left: 40px;">a) Are they compatible with XXXXX's emergency procedures?</p> <p>13. Is there documentation XXXXX's personnel have reviewed and determined the emergency procedures are adequate?</p> <p style="padding-left: 40px;">a) Is there documentation as to whom determined the adequacy?</p> <p>14. Did a contractor's emergency procedures contain an emergency evacuation plan?</p> <p style="padding-left: 40px;">a) Is it compatible with XXXXX's emergency evacuation plan?</p> <p>15. Are a contractor's emergency procedures readily available to employees?</p> <p>16. Are a contractor's emergency telephone numbers posted and convenient to all employees (both XXXXX's and his/hers)?</p>	

Audit Protocol for an Owner's Contractor's Health and Safety Management Program

Facility/Unit: _____

Date: _____

Results	Item Description	Observations
	<p><u>Work Criteria</u></p> <ol style="list-style-type: none"> 1. Are XXXXX's safe work permits prepared, reviewed and signed, where applicable, before any work begins? 2. Have written work procedures been provided by a contractor where applicable, and determined to be adequate by XXXXX's personnel? <ol style="list-style-type: none"> a) Who reviewed the program to determine its adequacy? 3. Do a contractor's employees frequently discuss health and safety issues? <ol style="list-style-type: none"> a) Has a contractor provided appropriate documentation? b) What is the frequency? 4. Is there a periodic review of a contractor's safety performance? 5. Does a contractor have an effective Industrial Hygiene Program for his/her employees? 6. Are all incidents involving a contractor immediately reported to XXXXX's representative? 7. Are thorough investigations conducted promptly? 8. Are copies of all incident reports provided to the representative? 	

Audit Protocol for an Owner's Contractor's Health and Safety Management Program

Facility/Unit: _____

Date: _____

Results	Item Description	Observations
	<p>9. Does a contractor submit a monthly report summarizing accidents and man hours to XXXXX's representative?</p> <p>10. Is a contractor regularly monitored by XXXXX's personnel, involving:</p> <ul style="list-style-type: none"> a) Attending a contractor's safety meetings? b) Review of a contractor's safety reports and action plans? c) Review of record keeping practices and documentation? d) Unannounced work place reviews? <p>11. Is there documentation of these monitored activities, including:</p> <ul style="list-style-type: none"> a) By whom they were performed? b) The date they occurred? <p>12. Does a contractor conduct self-audits regarding health and safety?</p> <p>13. Are copies of a contractor's self-audits provided to XXXXX's representative?</p> <p>14. Are documents of these self-audits on file and available?</p>	

Audit Protocol for an Owner's Contractor's Health and Safety Management Program

Facility/Unit: _____

Date: _____

Results	Item Description	Observations
	<p><u>Post Work</u></p> <ol style="list-style-type: none">1. Are documents supporting past work evaluations of a contractor on file and available?2. Are evaluations conducted on a contractor after the completion of the job?3. Do the reports address the items identified in the Contractor's Safety Standard?	

APPENDIX L

Sample Audit Protocol for Owner's Contractor Health and Safety Program

Purpose: This appendix provides a sample audit protocol for an owner to audit a facility's contractor health and safety program. The audit protocol should be modified based on the company's requirements for contractor safety.

When to Use: When auditing the owner's contractor safety and health program.

Who Uses: Owner

Section Reference: 8.5

Page: 8.3

CONTRACTOR SAFETY MANAGEMENT SYSTEMS REVIEW WORKSHEET

Review Team Members: _____

Facility/Unit: _____

Date: _____

Results	ITEM DESCRIPTION	OBSERVATIONS/COMMENTS
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	<p>COMMITMENT</p> <ol style="list-style-type: none">1. Do XXXXX facility safety representatives attend pre-bid conferences?2. Do contracts contain adequate job specific health and safety requirements?3. Does the facility have procedures to prevent contractors from working at all locations should they consistently disregard or ignore health and safety requirements?	
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CONTRACTOR SAFETY MANAGEMENT SYSTEMS REVIEW WORKSHEET

Facility/Unit: _____

Date: _____

Results	ITEM DESCRIPTION	OBSERVATIONS/COMMENTS
	<p>CONTRACTOR SELECTION</p> <ol style="list-style-type: none"> 1. Are evaluations of contractors conducted prior to their selection? 2. Does the contractor evaluations include: <ol style="list-style-type: none"> a) Past safety performance b) Past experience at XXXXX facility c) Safe work procedures d) Employee training e) Safety programs f) Hazard communication program g) Proper health and safety documentation h) Fitness for duty policy i) Accident statistics/incident rates j) WCB premiums 3. Is there a record of the criteria used for contractor selection on file? 4. Are the evaluations of each contractor on file? 5. Are contractors removed from a qualified bidders list if safety conformance is not acceptable? 6. Are there records which indicate that contractors have been removed from a qualified bidders list? 7. How are the appropriate individuals responsible for hiring contractors informed of a contractor being removed? 8. Are all appropriate individuals informed of which contractors have been removed from the bid list? 	

CONTRACTOR SAFETY MANAGEMENT SYSTEMS REVIEW WORKSHEET

Facility/Unit: _____

Date: _____

Results	ITEM DESCRIPTION	OBSERVATIONS/COMMENTS
	<p>PRE-WORK CRITERIA</p> <ol style="list-style-type: none"> 1. Do safety personnel ensure that site specific and health requirements are prepared and used when discussing job requirements with contractors? 2. Are copies of the written requirements and all addendum kept with the contract on site? 3. Do all contractor employees, including key contractor management representatives, receive a thorough site orientation before beginning work which include: <ol style="list-style-type: none"> a) Location safety requirements: <ul style="list-style-type: none"> - Facility safety rules - Permitting of work activities - Protective equipment requirements - Incident reporting procedures b) Hazard Communication Program briefing <ul style="list-style-type: none"> - Hazards of chemicals - Hazards of process c) Special hazards of the proposed work and areas (physical, biological, chemical) d) The appropriate communication lines between the contractor and XXXXX representative has been established. e) Casual gathering of employees inside the workplace area is not permitted. f) Emergency evacuation signals and routes 4. Is there documentation that demonstrates that contractor employees understand the required XXXXX safety rules and regulations prior to starting the job? 5. Does the prime contractor provide a representative responsible for all safety information/activities? 	

CONTRACTOR SAFETY MANAGEMENT SYSTEMS REVIEW WORKSHEET

Facility/Unit: _____

Date: _____

Results	ITEM DESCRIPTION	OBSERVATIONS/COMMENTS
	<p>6. Have contractors demonstrated that their employees know how to perform their job tasks?</p> <p>7. Have contractors provided documentation of employee training?</p> <p>8. Was the training documentation reviewed and determined to be adequate by XXXXX personnel? a) Is there documentation as to who determined the adequacy?</p> <p>9. Have written Hazard Communication Programs been provided by contractors?</p> <p>10. Is there documentation that XXXXX personnel has reviewed and determined that the program is adequate? a) Is there documentation as to who determined the adequacy?</p> <p>11. Are copies of the contractors Hazard Communication Program readily available to employees?</p> <p>12. Have written emergency procedures been provided by contractors? a) Are they compatible with the facility's emergency procedures?</p> <p>13. Is there documentation that XXXXX personnel have reviewed and determined that the emergency procedures are adequate? a) Is there documentation as to who determined the adequacy?</p>	

CONTRACTOR SAFETY MANAGEMENT SYSTEMS REVIEW WORKSHEET

Facility/Unit: _____

Date: _____

Results	ITEM DESCRIPTION	OBSERVATIONS/COMMENTS
	<p>14. Did the contractors emergency procedures contain an emergency evacuation plan? a) Are they compatible with the facility's?</p> <p>15. Are the contractor emergency procedures readily available to employees?</p> <p>16. Are the contractors emergency telephone numbers posted and convenient to all employees (both XXXXX and contract)?</p> <p>17. Has the contractor been provided with XXXXX Hazard Communication Program?</p> <p>18. It is documented that the contractor received a copy of XXXXX Hazard Communication Program?</p> <p>19. Are copies of XXXXX Hazard Communication Program readily available to contractor employees?</p>	

CONTRACTOR SAFETY MANAGEMENT SYSTEMS REVIEW WORKSHEET

Facility/Unit: _____

Date: _____

Results	ITEM DESCRIPTION	OBSERVATIONS/COMMENTS
	<p>WORK CRITERIA</p> <ol style="list-style-type: none"> 1. Are XXXXX safe work permits prepared, reviewed and signed where applicable, before any work begins? 2. Have written work procedures been provided by contractors where applicable and determined to be adequate by facility personnel? <ol style="list-style-type: none"> a) Who reviewed the programs to determine their adequacy? 3. Do contractor employees frequently discuss health and safety issues? <ol style="list-style-type: none"> a) What is the frequency? b) Have the contractors provided appropriate documentation? 4. Is there a review of contractor safety performance periodically? 5. Do contractors have an effective Industrial Hygiene program for contract employees? 6. Are all incidents involving contractors immediately reported to the XXXXX representative? 7. Are thorough investigations conducted promptly? 8. Are copies of all incident reports provided to the representative? 9. Do the contractors submit a monthly report summarizing accidents and manhours to the XXXXX representative? 	

CONTRACTOR SAFETY MANAGEMENT SYSTEMS REVIEW WORKSHEET

Facility/Unit: _____

Date: _____

Results	ITEM DESCRIPTION	OBSERVATIONS/COMMENTS
	<p>10. Are contractors regularly monitored by XXXXX personnel involving:</p> <ul style="list-style-type: none"> a) Unannounced workplace reviews b) Review of recordkeeping practices and documentation c) Review of contractor safety reports and action plans d) Attending contractor safety meetings <p>11. Is there documentation of these monitored activities including:</p> <ul style="list-style-type: none"> a) who they were performed by b) date they occurred <p>12. Do the contractors conduct self audits regarding health and safety?</p> <p>13. Are copies of the contractors self audits provided to the representative?</p> <p>14. Are documents of these self audits on file and available?</p>	

CONTRACTOR SAFETY MANAGEMENT SYSTEMS REVIEW WORKSHEET

Facility/Unit: _____

Date: _____

Results	ITEM DESCRIPTION	OBSERVATIONS/COMMENTS
	<p>POST WORK</p> <ol style="list-style-type: none">1. Are evaluations conducted on contractors after completion of the job?2. Do the reports address the items identified in the Contractor Safety Standard?3. Are documents supporting past work evaluations of contractors on file and available?	

NOT USED
(previously APPENDIX F)

Typical
Pre-Qualification Evaluation Form

PURPOSE: This appendix illustrates a detailed method for evaluating the Pre-Qualification Form (PQF) submitted by contractors. Use of this method implies that documentation was submitted with the PQF. This evaluation method should be undertaken only after the evaluation criteria has been modified based on facility or company criteria.

Section Reference: 3.2.1
Page: 3-4

Typical Pre-Qualification Evaluation Form

HEALTH AND SAFETY PERFORMANCE	
1. Last year injury frequency rate comparison to contractor's three preceding years average. _____	
A. Contractor supplied insufficient information to establish rate or rate is more than 75% higher than Contractor's three preceding years average. (0)	
B. Rate is 26% to 75% above Contractor's three preceding years average. (7)	
C. Rate is within plus or minus 25% of the Contractor's three preceding years average. (14)	
D. Rate is more than 25% below the Contractor's three preceding years average. (20)	
2. Latest year injury severity rate comparison to contractor's three preceding years. _____	
A. Contractor supplied insufficient information to establish rate or rate is more than 75% higher than Contractor's three preceding years average. (0)	
B. Rate is 26% to 75% above Contractor's three preceding years average. (7)	
C. Rate is within plus or minus 25% of the Contractor's three preceding years average. (14)	
D. Rate is more than 25% below the Contractor's three preceding years average. (20)	
3. Three year cumulative injury frequency rate comparison to industry 3 year cumulative rate. _____	
A. Contractor supplied insufficient information to establish rate or rate is more than two standard deviations higher than industry norm. (0)	
B. Rate is more than one but less than two standard deviations above industry norm. (10)	
C. Rate is within plus or minus one standard deviation of the industry norm. (20)	
D. Rate is more than one standard deviation below the industry norm. (30)	
4. Three year cumulative severity rate comparison to industry 3 year cumulative rate. _____	
A. Contractor supplied insufficient information to establish rate or rate is more than two standard deviations higher than industry norm. (0)	
B. Rate is more than one but less than two standard deviations above industry norm. (10)	
C. Rate is within plus or minus one standard deviation of the industry norm. (20)	
D. Rate is more than one standard deviation below the industry norm. (30)	
Health and Safety Performance Rating: (Total Sum) x 0.4 = Rating	

Page 1 of 4

Typical Pre-Qualification Evaluation Form

HEALTH AND SAFETY PROGRAM

5. Substance Abuse Program _____

- A. None. (0)
- B. Substance testing for pre-employment only. (3)
- C. Substance testing includes random and pre-employment. (7)
- D. Substance testing includes pre-employment, random and testing for cause. (10)

6. Health and Safety Program _____

- A. No implemented safety program. (0)
- B. Safety program exists, but is not an integrated program involving all employees. (3)
- C. Safety program exists, employees are trained and educated. (7)
- D. Safety program is an integrated part of contractors operation. Employees are trained, safety goals are clearly established, employees are recognized for safety performance excellence. (10)

7. Health and Safety Program - Documentation _____

- A. No safety program existing. (0)
- B. A minimum number of procedures exist. (3)
- C. Most procedures such as hot work, confined space entry, lockout/tagout, hearing conversation, HAZCOM exist. (7)
- D. Most procedures such as hot work, confined space entry, lockout/tagout, hearing conservation, HAZCOM exist and are document with training. (10)

8. Health and Safety Meetings cumulative rate. _____

- A. None. (0)
- B. Periodic safety meetings for special operations only. (3)
- C. Safety meetings performed on a regularly scheduled basis by the Supervisor or Safety Representative. (7)
- D. In addition to "C", employees are assigned topics to discuss on a rotational basis. (10)

Page 2 of 4

Typical Pre-Qualification Evaluation Form

HEALTH AND SAFETY PROGRAM

9. Safety Orientation Program - New Hire _____

- A. No formal program (0)
- B. Verbal instructions on Company procedures only, program doesn't include many safety elements. (3)
- C. Orientation booklet provided for new employee, but no on-the-job orientation by supervisor. Program doesn't include classroom training. (7)
- D. Employee handbook provided, explains and demonstrates new employee's job. Follow up observation of new employee at work is included. Employee is explained safe practices and emergency duties. (10)

10. No Safety Orientation Program - New or Promoted Supervisor _____

- A. No formal program. (0)
- B. Verbal instructions on Company procedures only, program doesn't include many safety elements. (3)
- C. Orientation booklet provided for new supervisor, but no on-the-job orientation by supervisor. Program doesn't include classroom training. (7)
- D. Classroom training of supervisor explains and demonstrates supervisor safety aspects for supervisors (minimum 8 hours). (10)

11. Inspections _____

- A. No formal safety inspection program. (0)
- B. Safety inspection program developed, but implemented haphazardly and fails to meet government requirements. (3)
- C. Safety inspections program developed and implemented, fails to meet government requirements. (7)
- D. Safety inspection program effective and meets government requirements. (10)

12. Incident Investigation _____

- A. No procedure exists. (0)
- B. Written procedure requiring basic reporting of personal injuries only. (3)
- C. Written procedure requiring reports on all accidents/incidents. (7)
- D. Procedure acknowledges accident reports to be provided by Operator's representative. Supervisory investigation required to determine and correct causes. (10)

Typical Pre-Qualification Evaluation Form

HEALTH AND SAFETY PROGRAM

13. Safety Staff _____

- A. None on staff. (0)
- B. Safety is assigned to a specific person on location. (3)
- C. Safety professional on staff. Not routinely involved in operations. (7)
- D. Safety professional on staff who routinely inspects operations and conducts safety meetings. (10)

Safety Program Rating: (Total Sum) x 0.6 = Rating

Total Rating:

Safety Performance _____

Safety Program _____

Total Percentage _____

Evaluated by: _____

Title: _____

Date: _____

NOT USED

(previously APPENDIX J)

Typical Notification of Deficiency

PURPOSE: This appendix provides a typical form for owners to use in documenting deficiencies with contractor's health and safety performance.

Section Reference: 5.3, 6.2.1

Page: 6-2

