



Alberta Construction Safety Association

Effective March 14, 2020, the Alberta Construction Safety Association (ACSA) will only accept electronic SECOR submissions. We will no longer accept mailed submissions (paper or USB).

If a company does not keep store their documentation electronically, they will be required to scan it so it can be submitted electronically. All submissions must be well organized, labelled, and easy to navigate. Best practice is to have one folder for each element and to save documentation in the corresponding element's folder. All attachments/documents must be labelled appropriately and easy to identify. The evaluation tool should be kept together as its own document.

When completing the evaluation, please read the question and program guidelines carefully and submit only what is being requested. Submitting more documentation than is required may result in your SECOR submission being returned to you.

When a question requests a sample, submit only enough to demonstrate that you are following your Health & Safety Management System (HSMS). This could be one or two documents per month for the year, or one or two documents per week for the busiest three months of the year. If more documentation is required, the Quality Assurance (QA) Analyst will request it.

When you are finished the evaluation, you can submit your evaluation either by

1. Emailing a compressed (zipped) folder to cor@youracsa.ca, or
2. Saving the submission online (*e.g., Dropbox, OneDrive, Google Docs, etc.*) and sending a download link to cor@youracsa.ca

If you have any questions regarding the submission of your SECOR Evaluation, please contact the COR department at 1.800.661.2272 or cor@youracsa.ca.

SECOR Updates

SMALL EMPLOYER CERTIFICATE OF RECOGNITION (SECOR) EVALUATION TOOL

This evaluation tool is designed to determine if a small employer has implemented the basics of a health and safety management system. The ACSA requires the submission of adequate documentation to allow for verification of the small employer's health and safety system and to score the questions in the audit instrument. To meet minimum standards, the overall score must be at least 80% and each element must score at least 50%.

SECOR is limited to an employer that has no more than 10 employees at any given time. This includes all full-time, part-time, temporary, and permanent employees and owners, directors, etc. The ACSA cannot accept an application for SECOR if a company has exceeded 10 employees.

SECOR Training Requirements

At all times, a small employer with, or wanting to achieve, SECOR certification through the ACSA must have at least one full-time employee with the SECOR training requirements. The 3 required training courses are Small Employer Health & Safety Management (or Principles of Health & Safety Management), Standard Two-day First Aid, and one of the industry-specific training courses (CSTS, RSTS, ESTS, or PCST).

Every three years, a full-time employee must complete an ACSA course to remain eligible for SECOR. This maintenance requirement is three years from the last course completed, not three years from when the company certifies in SECOR.

It is the company's responsibility to maintain the SECOR training requirements, current at the time of evaluation.

The Assessor

The individual who completes the Evaluation Tool is known as the assessor. This person can be internal or external to the company and must have a certificate in Small Employer (or Principles of) Health and Safety Management. This training is required of the assessor even if there is someone else in the company who holds this course for the regular Training Requirements.

If the assessor is external to the company, please provide their ACSA Student ID or date of birth on the company information page.

Completion Instructions

1. Read each question and program guidelines. Attach supporting documentation for each question where it is requested and ensure this supplementary documentation is included in your submission.
2. Operational documentation must be from the preceding twelve months; anything outside of this period will not be considered for the evaluation.
3. If you are not able to provide the documentation, please provide a comment in the space provided next to the question and ensure this item is added to your Action Plan.
4. Comments are not required if you are submitting the requested document. However, we do recommend providing an explanation as to where the document can be found, or any notes on the document that you wish your QA analyst to read, you can include a comment.
5. Altered documents cannot be accepted for review. White out use is not allowed. SECOR submissions may be rejected if documents cannot be verified.
6. Questions marked with an asterisk (*) do not need to be answered by owner-operators (please write N/A in the comments section) and are excluded from scoring for owner-operators. Please note, owner-operators are companies where there is only **one** individual covered by the company's WCB Account.
7. All evaluations must be submitted electronically. Please refer to the first page of the evaluation tool for information on how to submit.

IMPORTANT

Assessors have a maximum of 45 days to complete the evaluation (*filling out the evaluation tool and gathering the documentation*). This is indicated by the Start and End Dates on the Company Information Page.

The evaluation must be submitted within 21 days of the End Date

Company Information Page

- All fields must be completed
- A description of normal work activities and season is required to determine relevance of sample information provided. If more room is required, attach in formal written document.
- The assessor must be indicated. If the assessor is external to the company, please provide their date of birth or ACSA student ID so we can verify the assessor training requirements have been completed
- List who has the SECOR training requirements. If the courses are more than three years' old, please also indicate what course was completed to comply with the three-year continuing education.

Assessor Code of Ethics

The SECOR Assessor (*individual who completed the evaluation tool*) is required to review and sign the attached Code of Ethics and return it with the Evaluation Tool.

If the SECOR Assessor and the Owner/Company Representative is the same individual, please sign both areas.

Action Plan

An action plan must be developed and submitted with your evaluation as part of question 12.3. The action plan must be completed prior to submitting the evaluation to the ACSA and will list items that the company will work on over the next year, or until the next evaluation is due.

- Action items should follow the **SMART** criteria: **S**pecific, **M**easurable, **A**ttainable, **R**elevant, and **T**ime-bound.
- Action items should be related to health and safety objectives. General program maintenance cannot be used as an action item.

Previous Evaluation Action Plan applies to companies who have been in the SECOR program for more than one year. The action plan must list all corrective actions taken, dates of completion and reviewer signature. If this is first evaluation for your company this is not applicable; however, an action plan as a result of this evaluation will be required for review in element 12.



Company Information Page

Start Date of Evaluation: _____ End Date of Evaluation: _____

Start date is the first day assessor worked on the evaluation

End date is the last day assessor worked on the evaluation

Have you submitted 12 months of documentation? Yes No *If no, provide explanation:* _____

Company Legal Name: _____ Company Trade Name: _____

Company Address: _____ City/Town: _____ Province: _____

Company Phone: _____ Company Email: _____ Postal Code: _____

Company Contact: _____ Contact Phone: _____ Contact Email: _____

WCB Account Number: _____ Industry code(s): _____ Peak # of Employees: _____

Peak is the highest number of employees in the last twelve (12) months

Please provide a brief description of your company's regular work activities

Assessor Name: _____ **Assessor Phone:** _____ **Assessor Email:** _____

SECOR Training Requirements

Please list the full-time employee(s) who currently has the required training for the company, along with their date of birth or ACSA Student ID. **Courses completed for the three-year continuing education should be indicated below.** Attach copies of Standard First Aid certificates if completed outside the ACSA.

Course	Name of Individual	Date of Birth or ACSA Student ID
Small Employer (or Principles of) Health & Safety Management		
Standard two-day First Aid		
CSTS (or RSTS, ESTS, PCST)		



Alberta Construction Safety Association (ACSA) SECOR Assessor Code of Ethics

SECOR Assessors are expected to hold themselves to the highest standards of honesty and professionalism. To ensure that quality evaluations are consistently performed, assessors must:

- Comply with all applicable laws, rules and regulations of federal, provincial and local governments, and appropriate private and public regulatory agencies
- Maintain sound independent judgment and act with due care and competence
- Behave in such a manner that good faith, honesty and integrity will not be questioned
- Refrain from using any information gathered for the purpose of personal gain (including the gain of family members or acquaintances), unless they are the owner of the company
- Ensure that information obtained through the audit process is treated as confidential at all times and not disclosed to parties other than the employer or the ACSA unless the assessor is authorized or otherwise legally obligated to disclose the information
- Be honest, accurate, consistent, and complete in evaluations of data obtained through documentation, interviews, and observation. Avoid any misrepresentations or any omissions relevant to the scope of the audit
- Ensure that notes and documentation are clear, concise, reflective of the audit findings and relevant to the employer's operations (i.e. all samples are from the last 12 months or the employer's season)
- Ensure that audits comply with all required timelines and Partnerships standards
- Ensure that evaluations are based on objective findings and accurate interpretations, and are not affected by personal feelings or prejudices
- Report any situation where an assessor or auditor may have violated the Code of Ethics

Assessor Code of Ethics Violations: The penalties for breaching the SECOR Assessor Code of Ethics depend on the circumstances, previous infractions, and the severity of the breach. Penalties can include suspension and/or permanent revocation of the SECOR. If certification is suspended for a period of 12 months or more, all Certifying Partners will be notified. Assessors may not pursue any legal action against decision makers or their organizations as a result of the application of the Assessor Discipline Process.

I, _____, have read and understood the ACSA Code of Ethics as stated above. I agree with these requirements and will adhere to these rules. As a SECOR Assessor, I also realize that any breach of the Code of Ethics may result in a formal review and subsequent suspension of my ability to conduct further evaluations.

Assessor Signature

Date



PROGRAM GUIDELINES

1. Corporate Health and Safety

Corporate Health and Safety Policy must be signed and dated by Owner/Senior Manager.

- Roles and Responsibilities must be included.
- Policy must include company name or logo.
- Policy must make reference to applicable legislation.

Attach a list of relevant sections, or parts of the occupational health and safety legislation that apply to your workplace, and work activities. Explain how it is accessible to employees.

- This may include federal, provincial, and/or municipal legislation if it is applicable to your operation. This may also include references to other safety related legislation, in addition to the health and safety legislation, such as: motor vehicle or explosives legislation. Do not send in copies of the actual legislation.

Below are the questions requiring either a Directive or Operational document(s).

- 1.1 a) - Directive document
- 1.1 b) - Directive document
- 1.2 - Directive document

NOTE: Any directive documents have been updated within the last 12 months must be submitted for evaluation.



Element 1 – Corporate Health and Safety Policy	Comments
1.1 Is there a corporate health and safety policy? a) Attach a copy of your signed and dated policy	
b) Attach a copy of the Assignment of Roles and Responsibilities for owners, managers, supervisors, workers, etc.	
1.2 Attach a list of relevant sections or parts of the occupational health and safety legislation that apply to your workplace and work activities. Explain how it is accessible to your employees. <i>Do not send in copies of the actual legislation</i>	



PROGRAM GUIDELINES

2. Hazard Assessment

Formal hazard assessments must be developed for all jobs or tasks that are performed by company personnel. Formal hazard assessments must:

- Identify and prioritize hazards and allow for control measures to be developed before work is started
- Include the office, shop and any activities at the project start-up phase and all jobs/tasks/work types that are carried out under the company's WCB account and industry code(s).

Some of this process may have been completed when the company was carrying out the Job Hazard Assessments for the development of Safe Job Procedures and Safe Work Practices for the program.

The employer must ensure the hazard assessment process is repeated:

- at reasonably practicable intervals to prevent the development of unsafe or unhealthy working conditions
- when a new work process is introduced
- when a work process or operation changes
- before the construction of significant additions or alterations to a work site

Please provide documentation to validate this process. If you are using a site specific hazard assessment process (e.g. FLHA) please provide at minimum 6 samples from the past 12 months or the season representing your normal activities.

Below are the questions requiring either a Directive or Operational document(s).

- 2.1 a) - Operational Document
- 2.1 b) - Operational Document
- 2.1 c) - Operational Document
- 2.2 a) - Operational Document
- 2.2 b) - Operational Document
- 2.2 c) - Operational Document



Element 2 – Hazard Assessment	Comments
2.1 Attach copies of completed formal hazard assessments for all jobs/tasks/positions including the office and pre-project activities. Ensure these assessments include: a) identification of hazards	
b) prioritization	
c) identification of control types	
2.2 Attach copies of your ongoing hazard assessments for mobile work sites or reviews of the formal assessment for fixed sites. Ensure these assessments include: a) scope of work	
b) applicable hazards	
c) appropriate controls	



PROGRAM GUIDELINES

3. Safe Work Practices

- Safe Work Practices must be developed for all relevant types of work the company performs and must be reviewed when required.

4. Safe Job Procedures

- Safe Job Procedures must be developed for all critical tasks and must be reviewed when required.
- Review of the Safe Work Practices and Safe Job Procedures can be confirmed through orientations, safety meetings, formal annual reviews, etc.

5. Company Rules

There must be a written set of company rules. These rules must ensure that policies, applicable legislation, emergency response procedures, hazard control methods, and reporting procedures for new and existing hazards, incidents, injuries, and illnesses are followed.

- An Enforcement Policy must be developed that includes progressive disciplinary action for noncompliance with the company safety program. Evidence of enforcement must be documented, and can be cross-referenced with workplace inspection reports, near miss/ incident investigations, safety meetings etc.
- Must have an Employee Warning Report form.

Below are the questions requiring either a Directive or Operational document(s).

- 3.1 - Directive Document
- 4.1 - Directive Document
- 5.1 a) - Directive Document
- 5.1 b) - Directive Document
- 5.1 c) - Directive Document

NOTE: Any directive documents have been updated within the last 12 months must be submitted for evaluation.



Element 3 – Safe Work Practices (SWP)	Comments
<p>3.1 Have appropriate Safe Work Practices been developed as a result of the formal hazard assessment process? Attach 3 Safe Work Practices relevant to the operations of the company</p>	
Element 4 – Safe Job Procedures (SJP)	Comments
<p>4.1 Have appropriate Safe Job Procedures been developed as a result of the formal hazard assessment process? Attach 3 Safe Job Procedures for critical tasks performed by the company</p>	
Element 5 – Company Rules	Comments
<p>5.1 Are the company rules written?</p> <p>a) Attach a copy of the company rules*</p>	
<p>b) Attach a copy of your enforcement policy*</p>	
<p>c) Attach a copy of sample completed “Employee Warning Report” forms or evidence of enforcement*</p>	

* indicates N/A for Owner/Operator



PROGRAM GUIDELINES

6. Personal Protective Equipment (PPE)

Must have a PPE Policy that includes a list of basic and specialized PPE used by the company (specialized PPE only if applicable).

- Policy must make reference to applicable legislation.
- Include proof of PPE maintenance and inspection.
- If the company uses respirators or fall protection, include an appropriate Code of Practice for Respirators or Fall Protection Plan, as per applicable Occupational Health and Safety Legislation. If the company does not use specialized PPE, write N/A under Comments.

7. Maintenance

Must have a Maintenance Policy.

- Policy must make reference to applicable legislation.
- A maintenance schedule specific to the company operations (following manufacturers' specifications) must be included for all tools, vehicles, and equipment.
- A sample of maintenance records covering the Evaluation period is required.

Below are the questions requiring either a Directive or Operational document(s).

- 6.1 a) - Directive Document
- 6.1 b) - Directive Document
- 6.1 c) - Operational Document
- 6.1 d) - Directive Document

- 7.1 a) - Directive Document
- 7.1 b) - Directive Document
- 7.1 c) - Operational Document

NOTE: Any directive documents have been updated within the last 12 months must be submitted for evaluation.



Element 6 – Personal Protective Equipment (PPE)	Comments
6.1 Is there a written PPE policy for basic and specialized PPE? a) Attach a copy of the PPE policy	
b) Attach list of all PPE used	
c) Attach proof of PPE maintenance and inspection	
d) Attach appropriate Codes of Practice/Plans for any specialized PPE used (respirators, fall protection, etc.)	
Element 7 – Maintenance	Comments
7.1 Is there a maintenance program for tools, equipment, and PPE? a) Attach a copy of the maintenance policy	
b) Attach a copy of the maintenance schedule	
c) Attach a sample of maintenance records for the previous 12 months	



PROGRAM GUIDELINES

8. Training & Communication

A safety orientation must be developed specific to the company, including:

- health and safety policies
- roles and responsibilities for health and safety
- awareness of applicable legislation
- emergency procedures
- investigations of near misses/incidents
- company rules
- PPE requirements.

Orientation of new hires must be completed on the first day of employment and signed off by employee and a company representative.

- Attach copies of all orientations performed in the previous 12 months.
- Ensure that training covers current job and industry specific training (identify specific industry hazards such as Safe Work Practices and Safe Job Procedures, H2S, fall protection, confined space entry, etc.).
- Must include minutes from safety meetings for which all attendees must print and sign their names to confirm their attendance. Verify discussions of any new and existing workplace hazards at safety meetings.

Below are the questions requiring either a Directive or Operational document(s).

- 8.1 a - i) - Directive Document
- 8.2 - Operational Document
- 8.3 - Operational Document
- 8.4 a) - Operational Document
- 8.4 b) - Operational Document

NOTE: Any directive documents have been updated within the last 12 months must be submitted for evaluation.



Element 8 - Training & Communication	Comments
8.1 Does the employer have a formal orientation program that includes: a) Health and Safety Policies*	
b) Roles and Responsibilities*	
c) Relevant Legislation*	
d) Emergency Response Plan*	
e) Hazard / Incident / Illness / Near Miss Reporting Procedure*	
f) PPE*	
g) Rules and Consequences*	
h) Signatures of employees and company representatives*	
i) Performed with all employees on the first day of work*	
8.2 Attach copies of all orientations performed in the previous 12 months* <i>(if none completed, attach a blank form)</i>	
8.3 Has appropriate job safety training been conducted? Attach copies of health and safety training records (SWP/SJP, first aid, WHMIS, CSTS, etc.)	
8.4 Do employees have the opportunity to participate in safety meetings? a) Attach minutes from 3 safety meetings held in the previous 12 months*	
b) Ensure that new and existing hazards have been identified and discussed in these meetings*	

* indicates N/A for Owner/Operator



PROGRAM GUIDELINES

9. Inspections

Must have an Inspection Policy.

- The policy must make reference to applicable legislation.
- The policy must state who is responsible for conducting inspections and how often the inspections are to be conducted.
- There must be an Inspection Form that has assigned corrective actions, and dates by which corrective actions are to be completed. Employee concerns with following rules, policies, legislation, control measures etc., should be noted with proper corrective/disciplinary actions or training opportunities identified and followed through.
- There must be a formal process for employees to report unsafe or unhealthy conditions. This can be done through safety meetings, updated hazard assessments, formal hazard identification forms, etc. Please specify how this is communicated.

10. Investigations

Must have an Investigation Policy.

- Policy must make reference to applicable legislation.
- Policy must define the process for reporting of workplace injuries, illnesses, incidents, and corrective measures taken.
- Must have an Investigation Form that includes corrective actions.

Below are the questions requiring either a Directive or Operational document(s).

- 9.1 a) - Directive Document
- 9.1 b) - Directive Document
- 9.2 a) - Operational Document
- 9.2 b) - Operational Document
- 9.2 c) - Operational Document
- 9.3 - Directive Document

- 10.1 a) - Directive Document
- 10.1 b) - Directive Document
- 10.1 c) - Operational Document

NOTE: Any directive documents have been updated within the last 12 months must be submitted for evaluation.



Element 9 – Inspections	Comments
9.1 Attach a copy of the inspection policy, which identifies a) Who will be responsible for conducting inspections	
b) Frequency of inspection for office/shop/active work sites	
9.2 Attach copies of all inspections conducted to show that a) Identified frequency has been met	
b) A standardized format suitable for the company’s operations has been recorded	
c) Corrective actions that are appropriate to the identified concerns are taken	
9.3 Submit an explanation of the process for employees to report unsafe or unhealthy conditions*	
Element 10 - Investigations	Comments
10.1 Are investigations into workplace accidents/incidents/illness/near misses completed, and have corrective actions been taken? a) Attach a copy of the incident investigation policy	
b) Attach a copy of your procedures for reporting incidents (<i>this could be included in your investigations policy</i>)*	
c) Attach copies of all investigations and corrective actions completed in the previous 12 months	

* indicates N/A for Owner/Operator



PROGRAM GUIDELINES

11. Emergency Planning

Must have an Emergency Response Plan appropriate to work activities including the office.

- Emergency drills must be carried out on fixed site locations (ensure drill date is recorded).
- Must have an Emergency contact sheet that includes phone numbers and names for all areas where work is to be performed.

12. Records and Statistics

- Must have Safety Activity Summary sheet as a minimum.
- Could include monthly/quarterly injury summaries and year-end summaries.
- An action plan must be developed based on the deficiencies identified through the evaluation process. The action plan must include: specific actions for implementation, individual accountable, and completion timeframes. If no deficiencies were found, list recommendations or items that will improve the overall HSMS
- You must include the implemented action plan from the previous year's evaluation **with** sample completed records as evidence. This previous action plan should be signed off by the Owner/Senior Operator. Write N/A if this is your first time completing this evaluation document.

13. Contracting Services

Applies to Small Employer companies that are hired by another company to provide a service. This would include any employer, person, organization, agency, city or government department, etc.

- Must have documentation showing that both parties and any other affected workers are aware of the identified hazards and the corrective actions implemented at the work site (include proof of communication of the hazards to all affected workers).
- Must have documentation showing results of a meeting between the small employer company and the company/organization/agency (city or government department, etc.) that hired the small employer.
- Examples of documentation may be found in hazard assessments, toolbox meetings, contractor pre-qualifications, contracts, etc.

Owner Signature

The SECOR Evaluation Tool must be signed by the Owner/Company Representative after the results of the evaluation have been presented. If the Owner/Company Representative and the SECOR Assessor is the same individual, please sign both areas.

Below are the questions requiring either a Directive or Operational document(s).

- | | | |
|------------------------------------|-----------------------------------|-------------------------------|
| • 11.1 a - e) - Directive Document | • 12.1 - Operational Document | • 13.1 - Operational Document |
| • 11.2 - Operational Document | • 12.2 - Operational Document | • 13.2 - Operational Document |
| • 11.3 - Operational Document | • 12.3 a-c - Operational Document | • 13.3 - Operational Document |
| | • 12.4 - Operational Document | |

NOTE: Any directive documents have been updated within the last 12 months must be submitted for evaluation.



Element 11 – Emergency Planning	Comments
11.1 Has the company developed an emergency response plan that includes: a) Potential emergencies and procedures	
b) Location of operational procedures for emergency equipment and location of emergency facilities	
c) ERP training requirements and fire protection requirements	
d) Alarm and emergency communication requirements/first aid services*	
e) Procedure and designated workers for rescue and evacuation*	
11.2 Attach a copy of the results of one emergency drill conducted*	
11.3 Attach a copy of your current emergency contact list; ensure company contacts are included	

* indicates N/A for Owner/Operator



Element 12 – Records and Statistics	Comments
12.1 Are yearly records kept of all workplace activities?	
12.2 Attach copies of year-end summaries	
12.3 Attach a copy of the action plan developed based on findings from this evaluation. The action plan must identify: a) Specific correction actions	
b) Individual(s) responsible	
c) Timelines for completion	
12.4 Attach a copy of last year’s action plan and any proof of implementation	



Element 13 – Contracting Services	Comments
13.1 Are workplace health and safety hazards or possible risks (including chemical hazards) identified at contracted work sites?	
13.2 Has a plan been developed in consultation with the contracting organization for ensuring workplace health and safety?	
13.3 Are employees made aware of the hazards and control measure at a contracted work site?	

Owner Acknowledgement

I, _____, OWNER OF THE SMALL EMPLOYER, ACKNOWLEDGE THAT THE EVALUATION OF THE EFFECTIVENESS OF THE COMPANY HEALTH AND SAFETY PROGRAM HAS BEEN COMPLETED AND THE ASSESSOR HAS REVIEWED THE EVALUATION RESULTS WITH ME.

BY SIGNING BELOW, I AGREE THAT THE COMPANY HAS NOT EXCEEDED 10 EMPLOYEES AT ANY GIVEN TIME AND I ACKNOWLEDGE THAT BY GOING OVER 10 EMPLOYEES, WE WOULD NOT BE ELIGIBLE TO PARTICIPATE IN THE SECOR PROGRAM.

Owner Signature

Date



Corrective Action Plan

Recommendation	Assigned to	Target date of Completion	Date completed	Reviewed by <i>(once completed)</i>