

# Table of Contents

- Terms of Reference/Definitions ..... 4**
- Element 1: Objective and Scope..... 8**
  - COR Policy Statement..... 8
  - COR Program Auditor Code of Ethics ..... 9
- Element 2: Auditor Skill Requirements ..... 11**
- Element 3: Auditor Non-Conformity..... 12**
- Element 4: Auditee Requirements ..... 14**
- Element 5: Auditee Tool Selection..... 14**
- Element 6: Audit Process ..... 14**
- Element 7: Audit Score..... 15**
- Element 8: Audit Approval..... 15**
- Element 9: Certification Length..... 16**
- Element 10: Certification Maintenance ..... 16**
- Element 11: Change Notification..... 18**
- Element 12: COR Program Complaints..... 18**
- Element 13: COR Program Review..... 19**
- Element 14: Temporary Certification ..... 19**
- Element 15: Equivalency and Reciprocity..... 19**
- Appendix ..... 20**





## TERMS OF REFERENCE/DEFINITIONS

### **Act**

Legislation that assigns health and safety duties, and responsibilities to individuals in the province.

### **Appellant**

One that appeals from a judicial decision or decree.

### **Audit**

An evaluation, e.g., of a system, against an approved standard.

### **Audit Report**

The audit report is the written document provided to the client that provides the results of the auditor's evaluation of the client's health and safety management system against the audit protocol.

### **Auditor Notes**

Notes prepared by the auditor during the audit that explains the rationale used for determining the appropriate scoring.

### **Certificate of Recognition (COR)**

A Certificate of Recognition (COR) is awarded to employers that meet established standards for safety.

### **Certifying Partner (CP)**

A safety or other association that assumes a leadership role on behalf of an industry sector. MSA is the Certifying Partner for the C6 industry in Saskatchewan.

### **Competent**

A person who is adequately qualified, suitably trained, and with sufficient experience to safely perform work without supervision, or with only a minimal degree of supervision.

### **Confidentiality**

The nondisclosure of certain information (except to another authorized person).

### **Confirmation Letter (a.k.a. Follow-up Letter)**

A letter written by the auditor to the client confirming the particulars of the upcoming audit, as agreed to by the client and the auditor.

### **Continuous Evaluation Process**

Ongoing evaluation and re-evaluation of the impact of documentation findings on other audit DIO (documentation, interviews, observation) activities.

## **Continuous Improvement**

Always striving to innovate, implement, and improve on the current health and safety management system.

## **Data Analysis**

Evaluating data collected through all three validation methods with the intent to summarize and analyze findings, accurately score the audit instrument, and develop an audit report.

## **Directive Documents**

Includes the documentation, which provides direction to the organization such as policies, procedures, and safety manuals. These documents tell the auditor how the organization expects health and safety to be managed.

## **Documentation**

Documentation includes all of the organization's documents that relate to the safety management system, including policies, rules, standards, procedures, guidelines, practices, and records. Records include such items as meeting minutes, memos, bulletins, inspection reports, preventive maintenance records, hazard reports, hazard analyses, emergency response drills, training records, and accident reports.

## **Employee**

Anyone who works for an organization (e.g., senior managers, managers, supervisors, and workers).

## **Employer Contact Person**

An employee of the company appointed by the client to assist the auditor with site logistics and support.

## **Executive Summary**

The portion of an audit report that provides a brief synopsis (summary) of all of the sections of the report.

## **Health and Safety Audit**

A methodical process of measuring the effectiveness of a health and safety management system by evaluating each of the elements identified in a prescribed audit protocol. An evaluation of an organization's health and safety management system against an approved standard.

## **Health and Safety Auditor**

A person who is trained, certified and deemed competent to conduct a health and safety audit by following a prescribed audit protocol.

## **Health and Safety Audit Protocol**

A technical specification developed with the cooperation and consensus of key stakeholders (i.e. industry, government, etc.) aimed at the promotion of optimum health and safety performance within an organization or industry.



## **Interview**

A meeting between an auditor and selected candidates from an organization being audited in which the candidate is asked about his/her personal views on the effectiveness of the safety management system.

## **Jobsite Evaluation**

An evaluation of an organization's compliance with corporate and regulatory requirements, using the Jobsite Evaluation checklist included with the audit protocol.

## **Lead Auditor**

The head of the auditor team who has overall responsibility for organizing the audit team and carrying out the audit.

## **Letter of Transmittal**

A letter addressed to the Certifying Partner describing the purpose of the audit and the type of audit.

## **Onsite Audit Debriefing**

A meeting is conducted by the auditor in which he or she reports the preliminary audit findings to company representatives. The debriefing meeting is held at the end of the onsite activities, signaling the completion of onsite data gathering.

## **Policy**

The documented principles by which an organization is guided in its management of affairs.

## **Pre-audit Meeting**

The opening meeting, between the auditor and the organization, represents the beginning of the audit activities. The main purposes of the meeting are to formally introduce the audit, describe the audit process and methodology, and clarify the objectives and desired outcomes of the audit.

## **Quality Assurance**

A set of review activities intended to ensure that the completed audit satisfies the Certifying Partner's requirement in a systematic, reliable fashion.

## **Reciprocity**

Recognition by one of two institutions of the validity of licenses, certifications, or privileges granted by the other.

## **Records**

Records are a form of documentation that include such items as meeting minutes, memos, bulletins, inspection reports, preventive maintenance records, hazard reports, hazard analyses, emergency response drills, training records, and accident reports. These documents provide written proof that the organization's directions (policies and procedures) are being followed.



## **Reliability**

The degree to which an observation can be **repeated**. The reliability of audit findings increases if they are found consistently in a variety of indicators (through documents, interviews, and observations).

## **Representative Sample**

A sample that accurately reflects the whole company. For example, the sampling of people to interview reflects the various levels of management and employees, full or part-time workers, and those on all shifts.

## **Sample**

A portion, piece, or segment that is representative of a whole.

## **Sample Size**

The number of documentation items selected for review is drawn from the size of the organization's documentation.

## **Sampling Strategy**

A method of choosing which of many items (such as documents) should be chosen for review. A good sampling strategy for documentation will enable the auditor to be confident that he or she is reviewing a sample of the company's documentation that is representative of all documentation for the company.

## **Validity**

The degree to which an observation is **relevant** to the subject under discussion. Validity in data collection means that your findings truly represent the phenomenon you are claiming to measure.

## **Worker**

An employee supervised by a manager or supervisor/foreman.

## **Worksite Observations**

Observations conducted during an audit of a worksite(s) to verify the information collected through documentation and interview phases; observations verify the application of safety management system standards, records, interviews and statements made by management, employees, and contractors.



## ELEMENT 1: OBJECTIVE AND SCOPE

### **COR Policy Statement**

The Motor Safety Association (MSA) is committed to the development, implementation and continuous improvement of health and safety management systems for the stakeholders in the C61 and C62 rate codes in Saskatchewan. To this end, the MSA COR certification process abides with the framework established by the Saskatchewan Joint Industry Committee.

The COR Program is designed to recognize those stakeholders that have developed and implemented a functioning health and safety management system. The program requires an organization to submit their facility to and meet a prescribed standard. The audit is based on a standard for health and safety that was developed by the Joint Industry Committee (JIC) and approved by the membership. Once the audit is completed, the auditor will forward the completed documents to the Executive Director for a certificate to be issued to the organization. The certificate will remain valid for three years, at which time another external audit must be completed.

The COR Program is based on continuous improvement that also evaluates the performance of certified organizations annually. Using industry accident rates as a benchmark, the organizations will be measured to ensure their safety management system continues to deliver consistently improved results.

All MSA employees will abide by and conduct themselves by following the Auditor Code of Ethics that has been developed for the COR Program.



## ***COR Program Auditor Code of Ethics***

The Motor Safety Association is responsible for maintaining the integrity and professionalism of external auditors for the Certificate of Recognition (COR). The association has developed the following Auditor Code of Ethics to ensure that external auditors have a standard to be accountable. These include integrity, objectivity, confidentiality, and competency.

### **Integrity**

Auditors shall:

- Perform their duties with honesty, fairness, diligence and responsibility.
- Respect and act with a dedication to the COR Program objectives and scope
- Conduct themselves without any perceived or real conflicts of interest.
- Advise the Association of any activities or actions of an auditor that may conflict with this Code of Ethics
- Never submit any report, information or judgment that is known to be false
- Never market themselves for private services while conducting an audit
- Conduct themselves within the laws of the provincial legislative body.

### **Objectivity**

Auditors shall:

- Conduct all audits as directed using the audit tool provided by the Association.
- Conduct all audits without prejudice or bias, be they personal or professional
- Not participate in activities that may influence or impair their judgment
- Immediately disclose to the Association and the Audit Client any information that may detrimentally affect their objectivity

### **Confidentiality**

Auditors shall:

- Maintain the confidentiality of any information they are privy to during an audit.
- Ensure that any information acquired during an audit is not used for personal or professional gain.
- Maintain, to the best of their ability, the results of any audit
- Ensure that any information gathered during interviews conducted while auditing is held confidential between the auditor and the interviewee





## Competency

Auditors shall:

- Engage in services only for which they have sufficient knowledge, skills, and experience to conduct.
- Not subcontract any obligation of the audit
- Never falsely represent themselves or the Association
- Be consistent and accurate in their evaluation and ensure that they report only verified facts.
- Conduct themselves and the audit in a professional, effective and efficient manner



## ELEMENT 2: AUDITOR SKILL REQUIREMENTS

To ensure that the Certification Program maintains credibility, MSA external auditors will need to meet certain requirements. At this point, only MSA employees are performing Certification Audits for members of the Motor Safety Association. MSA holds Auditors to the following guidelines:

1. Auditors may be deemed competent by the Executive Director based on Credentials and/or previous auditing experience.
2. Auditors may be subject to an interview to determine their level of knowledge and experience in the industry, auditing and safety management.
3. Junior/new employees working for MSA, with no previous auditing experience may be required to attend an Auditor training course as decided by the Executive Director. They will then be required to attend a minimum of three audits with an MSA Auditor acting as a mentor and Lead Auditor.  
Once the junior/ new employee attends the minimum of three audits they must complete one audit acting as lead auditor. An approved MSA auditor will evaluate their performance based on the requirements set out in MSA's **Auditor Evaluation**. If the MSA Auditor deems them competent to perform audits on MSA's behalf, they will be allowed to perform Certification Audits. If not, an action plan must be put in place to get the junior/new employee the experience and training needed to successfully attain Auditor status.
4. Approved MSA Auditors, when acting as Lead Auditors, will be required to verify the skills of the junior/new employee during the audit training process. Using the Auditor Evaluation Checklist and knowledge of the industry, MSA Lead Auditors will guide, coach, and mentor the auditor-in-training through the entire audit process and verify their skills/deficiencies throughout the process.
5. Review of the Auditor Evaluation Checklist with the auditor-in-training will be the responsibility of the Lead Auditor. Once reviewed and signed by both parties, the Auditor Evaluation Checklist will be submitted to the Executive Director for review. The completed evaluations, once approved, will be filed by the Executive Assistant to maintain evidence of process completion.

Once all of these guidelines have been satisfactorily completed, MSA will determine whether the auditor will be accredited. MSA reserves the right to re-evaluate external auditors at any time, and/or remove accreditation.



## ELEMENT 3: AUDITOR NON-CONFORMITY

Auditor non-conformity is an issue that must be addressed to ensure the COR Program External Auditors conduct themselves appropriately. MSA sees two important issues surrounding this element of the program. They are:

- Conflict of Interest
- Breach of Ethics

### **Conflict of Interest**

All MSA External Auditors are required to complete a Conflict-of-Interest Disclosure before conducting an audit for the Association. This disclosure will be reviewed by the Association and if necessary discussed with the Audit Client to ensure the results of the the audit will be accepted as valid. An External Auditor is deemed to be in a Conflict of Interest when:

- They stand to gain either personally or financially from the results of an audit
- They have been involved with the ongoing development and/or ongoing implementation of the safety management system and are audited
- They have falsified any information on the Conflict-of-Interest Disclosure

### **Breach of Ethics**

All External Auditors are required to adhere to the COR Program Code of Ethics. Auditors are considered to be in breach when any conduct is discovered that is contrary to the previously stated code.

### **Investigation**

Any issues of Auditor Non-Conformity will be investigated by the MSA Executive Director within 15 days of receiving the written non-conformity. All non-conformities will be submitted in writing (using the Complaint Form in Appendix 1.4) and supported by appropriate documentation. All documentation should be sent via registered mail to:

**Executive Director  
Motor Safety Association  
673 Henderson Drive  
Regina, Saskatchewan  
S4N 6A8**

Once the non-conformity and documentation have been received by the Executive Director, further communication will be performed via email or in writing within the 15 days of receipt.



***Please be advised that non-conformities must be reported within 60 days of the actual occurrence.***

Should evidence of the non-conformity be found, the Auditor in question shall have their auditing privileges revoked and the audit conducted while the non-conformity took place will be considered void.

If it is found that the Audit Client or Auditee was involved or had knowledge of the non-conformity, their application to the program will be removed and they shall be unable to reapply for a period of one year. If they were unaware of non-conformity, or unable to prevent it, MSA will schedule another audit to take place within ten working days or as schedules permit.

### **Appeals to the MSA Committee of Review (MSACOR)**

MSA has established a Committee of Review made up of industry member representatives from around the province. The Committee is made up of industry members, half of which are required to be present at any given meeting to ensure a quorum. Any appeal to the decision of the Executive Director must be submitted in writing along with supporting evidence to the Association within 30 days of the disciplinary action. The Association will then contact the Committee of Review, forward on the submission and set a hearing date within 60 days. Once the date has been set and a location has been determined, the affected parties will be contacted.

The Committee of Review must reach a majority decision, and it will be final. Any disciplinary actions handed out remain in effect until the Committee reaches their decision. Should the Committee rule against the Executive Director, all actions will be removed from the affected parties. (More information in Appendix 1.2).



## ELEMENT 4: AUDITEE REQUIREMENTS

For a COR Certification audit to be recognized and completed by the Motor Safety Association the auditee must have a current WCB number or subcode in either C61 or C62 rates codes or be an associate member in good standing. The Auditee must first submit an audit request in writing (Appendix 1.3). This request will include the following:

1. The complete business name of the organization making the request, including phone, WCB account number and subcode.
2. The number of persons employed at the organization.
3. A copy of the current Safety Manual and supporting documentation if possible.
4. A statement reflecting the organization's commitment to providing adequate resources for the audit to be completed.
5. The scope of the audit (which worksites are to be audited).
6. The name and contact information of the person requesting the audit on the organization's behalf. (See Appendix 1.3)

Once this information has been received, reviewed and accepted by the Association, the individual making the request will be contacted to set a date for the audit to be completed.

## ELEMENT 5: AUDIT TOOL SELECTION

The only audit document that will be accepted by MSA for the COR Program is the MSA COR Audit Tool. It has been chosen and developed specifically for the C61 & C62 industry using the guidelines set forth by the Saskatchewan Joint Industry Committee.

## ELEMENT 6: AUDIT PROCESS

The Motor Safety Association will determine which companies are eligible for participation in the COR Program using their WCB account numbers. The Association will then choose an audit team based on the information provided by the organization, experience and knowledge within the industry, and conflict of interest guidelines. Dates for certification audits will be set on a first-come, first-served basis

Once the application is received and reviewed, the Lead Auditor will put together an audit plan and forward it to the Auditee. It will include:

- The audit objectives
- The audit criteria
- The audit scope includes the identification of which facilities are to be audited. See Appendix 1.5 for Minimum Location Sampling Guide & Appendix 1.6 Minimum Interview Sample Table
- Dates and locations where on-site activities will occur.
- Duration of the audit



- Responsibilities of the audit team members and representatives from the organization
- Any follow-up dates that may be required

The audit will take place beginning on the agreed date between the Lead Auditor and the Auditee. Once the onsite activities are completed, the audit team may have a wrap-up meeting to summarize their findings with the organization. The wrap-up meeting is not meant to discuss the audit score or if the company met or did not meet the COR standard. A completed audit report will be forwarded to the organization within 14 days of the completion of the audit. Should a follow-up meeting be desired by the Audit Client, one may be set by contacting the Association after receipt of the report.

## ELEMENT 7: AUDIT SCORE

The COR Program audit has been developed to ensure that it not only measures the written content of the safety management system, but also the level of implementation.

For an organization to receive certification, it must achieve an **overall score of 80% or greater, with a minimum score of 60% in each element of the audit tool.**

## ELEMENT 8: AUDIT APPROVAL

Within 7 days of completion, the certification audits are forwarded to the Executive Director. The Executive Director or designate reviews the document to ensure it has been used correctly (qualitative) and the score is accurate (quantitative).

Organizations that meet the prescribed standard receive their certificate within 30 days of the completion of on-site activities.

Organizations not meeting the prescribed standard will be required to address/improve any shortfalls identified during the audit. Once shortfalls have been addressed, a limited-scope audit will be conducted on any element(s) that did not meet the standard mark of 60% per element(s) and 80% overall. If the auditee desires a limited-scope audit they are required to complete another audit request (Appendix 1.3) to trigger a limited-scope audit.

A limited-scope audit cannot be performed any sooner than three (3) months from the date of the original COR audit and cannot extend more than 1 year of the original COR audit. If an auditee does not meet the COR Standard within the one-year mark of the original COR audit, an entire COR audit would then need to be performed at the auditee's request.



## ELEMENT 9: CERTIFICATION LENGTH

Once the certification has been received, it will be valid for three years. However, MSA reserves the right to audit a company at any time during the three years. Organizations will be given 30 days' notice before a re-audit and an explanation as to why the audit is required. Occurrences that may require an early audit include but are not limited to:

- A fatality on site
- A disabling injury
- Regulatory issues

MSA may issue a certificate with a shortened expiration due to the duration of implementation of the safety management system, recent significant changes to the organization such as mergers or acquisitions, or seasonal work.

## ELEMENT 10: CERTIFICATION MAINTENANCE

Once the certification has been received by an organization, it must undertake certain activities to maintain it. The Motor Safety Association will also have responsibilities to ensure certificates are maintained. They are as follows:

### ***MSA Responsibilities***

1. Track which organizations have certification along with their expiration date.
2. Send notification to organizations 6 months before their COR Certification expiration date.
3. Issue certificates in a timely fashion.
4. Provide appropriate assistance to members with certification maintenance.
5. Provide the tools and information required by members.
6. Track legal requirements and notify members of such.
7. Maintain statistics on certified organizations.

### ***Auditee Responsibilities***

1. Inform MSA of any changes to the operation or organizational structure.
2. Inform MSA of changes for COR contacts.
3. Inform MSA of any disabling or fatal injuries.
4. Complete MSA Perception Surveys annually.
5. Submit an action plan based on the results of the perception survey by the applicable due date.
6. Continuously improve their health and safety performance.



The Motor Safety Association does not require Internal Audits for COR Maintenance. They do require COR Certified companies to perform a Perception Survey yearly – excluding the year of the External Audits (every three years).

Motor Safety Association requires a minimum of 70% of all staff per location to complete perception surveys. COR certification will be suspended in the event of less than 70% staff participation in completing perception surveys. In this event, if not corrected after 30 days COR certification is revoked and a Re-Audit is required to become COR certified.

The Perception Survey will obtain feedback from the staff on the effectiveness of the current safety program activities. The information generated by the perception survey provides both the Motor Safety Association and the certified company some insight into the effectiveness of their Safety Management System.

The perception survey is designed to generate employee involvement in the safety management system. Through the completion of the survey, employees will acknowledge safety management successes and identify opportunities for further improvement.

The online perception survey will be provided to every employee for completion. The survey statements are based on the elements of an effective safety management system as set out by the Joint Industry Committee (JIC) and adopted by the Motor Safety Association. The employees evaluate the company's level of performance from poor (strongly disagree) to excellent (strongly agree) using a five-point scale. Written comments can be provided to support their evaluation.

A Motor Safety Association staff member will tabulate the results of the Perception Surveys. The survey report will include a detailed tabular and graphical analysis of every survey statement. A performance score is provided for each element of the Perception Survey. The report will provide an interpretation of the survey results to assist the company with the development of a follow-up action plan.

Based on the results of the Perception Survey the problem areas should be identified and prioritized. After the identification and prioritization of the perceived problems, an action plan must be developed and submitted to the Motor Safety Association or the lead auditor by the assigned due date. If the action plan is not received within 30 days, COR certification will be suspended. The auditee then has 30 days thereafter to provide the action plan or their COR certification is revoked, and a Re-Audit is required to become COR certified.





The lead auditor and/or audit team members can assist the company to draft the action plan. The action plan for each company will differ depending on the results of the Perception Survey; however, the action plan should have timelines attached. The Motor Safety Association staff will provide full assistance to the companies when and if it is required.

## ***COR CERTIFICATION WILL BE REVOKED OR SUSPENDED IF THE ABOVE RESPONSIBILITIES ARE NOT MET BY THE AUDITEES***

### **ELEMENT 11: CHANGE NOTIFICATION**

The Motor Safety Association recognizes that over time organizations evolve and change. This may affect the certificate that a particular organization may possess. For this reason, it is the responsibility of the Certified Company to notify the Association of any changes to:

- The scope of the operation significantly changes.
- Change in ownership of the organization.
- Change in company locations including mergers and acquisitions.
- Change of the business name, business address and senior management
- Change in their WCB Account number, Rate Code, Sub Code

This notification must be made within 90 days of the changes becoming effective.

***Failure of the Certified company to notify the Association of said changes may lead to their COR Certification being revoked or suspended.***

### **ELEMENT 12: COR PROGRAM COMPLAINTS**

Should any member of the Association feel that they have not been treated fairly, or have a concern about the program, they may ask to have the Motor Safety Association Committee of Review (MSACOR) convene and hear their case. The request shall be forwarded to the Executive Director in writing, along with supporting evidence. If the Executive Director cannot rectify the concern, the information will be forwarded to the MSACOR Committee members to set a date for a meeting within 30 days of receiving the complaint. All affected parties will then be notified of the date and location of the meeting. The MSACOR Committee will hear the evidence provided and forward recommendations to the Executive Director within 10 days of the meeting. Refer to Appendix 1.2 for more information.



### ELEMENT 13: COR PROGRAM REVIEW

The COR Program will be evaluated by the MSACOR Committee of Review at intervals not exceeding three years. The purpose of this evaluation will be to recommend improvements to the program and the results of the review will be made available to all members. This will ensure that the MSA staff is held accountable to the industry. Once the review is complete, recommendations shall be forwarded to the Executive Director within 14 days.

### ELEMENT 14: TEMPORARY CERTIFICATION

Due to the nature of the work done by the companies that MSA serves in the rate codes of C61 and C62, it has been deemed at this time that there is no demand for a Temporary Certification Process as MSA member companies are businesses in the retail sales and service industry in Saskatchewan only. A review of this element may be undertaken as the industry demands change.

### ELEMENT 15: EQUIVALENCY AND RECIPROCITY

MSA has reviewed the element for Equivalency and Reciprocity and at this time does not recognize a demand for a process to consider and accept certifications issued by other CIPs. A review of this element may be undertaken as the industry demands change.



## Appendix 1.1

### Document List

The following list outlines the documents that need to be accessed while performing an audit or gap analysis. There are some documents, if possible and time permits, that can be provided to the auditor/inspector before arriving at the site. The balance may be requested during the performance of the audit/gap analysis.

#### Pre-arrival documents:

- Copy of the organization's safety manual/policy
- Copy of documents provided to new hires (i.e. Employee Handbooks, etc.)
- Copy of any Return to Work / Accident Kit forms sent with injured employees when they access medical aid.

#### On-site documents:

The number of each specific document required will change due to the size of the organization, complexity, etc. The auditors will ensure that documents are returned in the condition they were received.

- completed employee orientation checklists and evidence of annual review of orientation.
- accident/incident investigation forms
- inspection records (daily / pre-shift equipment, supervisor, OHC, worksite)
- OHC meeting minutes
- toolbox meeting minutes
- safe work practices
- safe work procedures
- records of safety management system measurement
- records of accountability actions (discipline and/or commendation)
- copies of core competencies/job descriptions and training requirements for each position
- training records for all employees
- risk assessments/job hazard assessments
- copies of inspections/ reports /notices of contravention from the OH&S Division of MLRWS
- proof of upper management review of safety records and activities (signed documents)
- list of modified duties including physical demands / Job Information Worksheets (JIW)
- maintenance records
- records of emergencies and drills



- copies of hygiene (sound, air quality, etc.) assessments
- Corporate hierarchy (names, positions, etc.)
- WCB stats and information
- Return to work forms, records.
- Ergonomic policy, training records, completed assessments.



## **Appendix 1.2**

### **Motor Safety Association Committee of Review (MSACOR)**

#### **Structure of the MSACOR**

- MSACOR directors shall be contacted and nominated based on submissions from the MSA staff. Nominations should be based on experience with the MSA audit tool, COR certification processes, safety in general, as well as leadership skills.
- Half of all MSACOR directors is required to be present at any given meeting to ensure a quorum.
- MSA will chair the annual review meeting or an MSACOR committee member. The chairperson may, with consent from the committee, invite any additional person(s) to attend an MSACOR meeting to provide additional information and comments.
- Each MSACOR director shall serve for a term of 2 years and can serve multiple consecutive terms.

#### **Duties of the MSACOR**

- Understand the MSA COR Audit tool, COR certification process and maintenance.
- Evaluate the COR audit tool, and COR certification process and advise or recommend improvements to the program at intervals not exceeding three years.
- Conduct Appeal hearings if/when MSA members feel they have not been treated fairly in an MSA Certificate of Recognition (COR) audit.
- Strive to meet annually to discuss the COR Audit tool and COR Certification process, discuss concerns and recommend improvements for adherence to the JIC Framework standards. Meeting intervals shall not exceed three years.
- Provide advisory recommendations to the MSA Executive Director or designate on any or all of the MSA Audit tool elements; all advisory recommendations are to be made at the MSACOR advisory meeting. The MSA Executive Director has the power to veto or accept any advisory recommendation put forth by the MSACOR.



## Meetings

- The MSACOR meeting should strive to meet annually however, the minimum requirement is to meet every three years.
- The chairperson will set a date and prepare an agenda and forward a copy of the agenda to all MSACOR directors in advance of the meeting indicating the time and location of the MSACOR meeting.
- The presence of not less than half of MSACOR directors shall constitute a quorum and shall be necessary to conduct the business of the MSACOR.

## Appeal

- Any appeal to the decision of a COR audit must be submitted in writing along with supporting evidence and documentation to the Executive Director of the MSA.
- MSA will then contact the MSACOR, forward on the appeal submission and set a hearing date within 30 days. Once the date has been set and a location has been determined, the affected parties will be contacted.
- Each MSACOR director shall have one vote and such voting may not be done by proxy. MSA staff have no voting power in an appeal.
- An MSACOR director with any interest in the appellant's business operation shall be excluded from any appeal hearing vote and cannot participate in the appeal hearing process.
- The MSA COR must reach a majority decision for appeals, and it will be final. Any disciplinary actions handed out remains in effect until the MSACOR reaches their decision. Should the MSACOR rule against the Executive Director, all actions will be removed from the affected parties.
- The MSACOR final decision results will be communicated and disclosed to all affected parties within 10 days of the decision.

## Appendix 1.3



### REQUEST FOR COR AUDIT/RECERTIFICATION

DATE:

#### ORGANIZATION INFORMATION

COMPLETE BUSINESS NAME:

ADDRESS: Both Location & Mailing if Different

CITY/POSTAL CODE:

PHONE NUMBER:

WCB ACCOUNT NUMBER

WCB RATE CODE

NUMBER OF EMPLOYEES

BUSINESS HOURS

#### CONTACT INFORMATION

PERSON REQUESTING AUDIT

PHONE NUMBER

EMAIL

**AUDIT SCOPE**

WHICH FACILITY(S)/AREA(S) ARE TO BE AUDITED?

DOES YOUR ORGANIZATION HAVE A QUIET/PRIVATE ROOM FOR AUDIT AND INTERVIEWS TO OCCUR?

YES     NO

IS YOUR ORGANIZATION COMMITTED TO PROVIDE ALL RESOURCES REQUIRED TO COMPLETE THE AUDIT IN A TIMELY FASHION?

YES     NO

IS AN ESCORT REQUIRED FOR THE AUDITER WHILE PERFORMING OBSERVATIONS AT YOUR FACILITY?

YES     NO

WHAT PERSONAL PROTECTIVE EQUIPMENT IS REQUIRED?

- STEEL TOE SHOES/BOOTS
- SAFETY GLASSES
- BUMP CAP/HARD HAT
- FIRE RESISTANT CLOTHING/COVERALLS
- SAFETY GLOVES
- HIGH VISIBILITY GARMENT
- HEARING PROTECTION
- Other

*COMPLETE FORM AND MAIL OR EMAIL TO:*

MOTOR SAFETY ASSOCIATION OF SASK.  
673 HENDERSON DRIVE  
REGINA, SK S4N 6A8

EMAIL: [INFO@MOTORSAFETY.CA](mailto:INFO@MOTORSAFETY.CA)  
PHONE: 306-721-0688

**EMAIL FORM**



## Appendix 1.4

# CERTIFICATE OF RECOGNITION PROGRAM COMPLAINT FORM

This form is to be completed when an individual or organization (Informant) brings a complaint against an auditor or another individual or organization.

Complaints will be reviewed on matters specified in the MSA COR Process Manual.

The complaint form submission must include documentation supporting the complaint such as:

- SIGNED SUMMARY OF COMPLAINT
- DOCUMENTATION SUPPORTING THE COMPLAINT
- SIGNED WITNESS STATEMENTS
- OBSERVATIONS

All required documentation needs to be attached. Incomplete forms will be returned for further information. Any questions on this form contact the Executive Director of MSA.




<b>Sign Complaint:</b>	
Informant Signature:	
Print Name:	Date:

<b>Supporting Documentation:</b>
Include any documentation to support the complaint such as: <ul style="list-style-type: none"><li>• SIGNED SUMMARY OF THE COMPLAINT</li><li>• DOCUMENTATION SUPPORTING THE COMPLAINT</li><li>• SIGNED WITNESS STATEMENT(S)</li><li>• OBSERVATIONS</li></ul>

## Appendix 1.5

### Minimum Location Sampling Guide

1-2 Locations	3-5 Locations	6-10 Locations	11-15 Locations	16-19 Locations	20 + Locations
Audit all Sites	Audit Minimum 3 Sites	Audit Minimum 5 Sites	Audit Minimum 6 Sites	Audit Minimum 8 Sites	Audit Minimum 10 Sites

#### Notes:

- Each location must submit a separate Audit Request (Appendix 1.3) to generate a COR Audit or a limited-scope re-audit.
- Locations to be audited will be selected using (Appendix 1.5) at the auditor's discretion considering logistics.
- At the auditor's discretion stores with multiple locations will be cycled through three years. This will allow a greater number of locations to participate in a COR audit.
- MSA can audit more sites than the minimum location sampling suggested amount as agreed with the auditee.
- Locations that were not originally audited may be cycled into future audits.
- Locations' largest site or head office will be audited in every three-year cycle.
- Sites with three or more staff members count as one audit location.
- Sites with less than three staff members are considered an optional audit location
- All agreed to audit locations must successfully complete the COR audit to receive certification.
- All agreed sites must meet the COR standard within one calendar year of the original audit date or first site audited to obtain certification for the entire auditee's firm number.
- Once all agreed sites have successfully met the COR standard, COR Certificates will be distributed to all Saskatchewan company worksites falling under the successful auditee's firm number.
- All sites will have the same anniversary date, this anniversary date will be the date that the last site successfully met the standard.
- All locations whether they were audited in the last audit cycle or not, will be required to have at least 70% of their staff per location complete perception surveys to maintain COR certification.

## Appendix 1.6

### Minimum Interview Sample Table

Minimum Interview Sample Table			
Company Size	# Worker Interviews	#Supervisor/ Manager Interviews	Total Interviews
5	2	1	3
10	5	2	7
15	8	2	10
20	9	3	12
25	10	3	13
30	12	3	15
35	13	3	16
40	13	4	17
50	14	4	18
100	16	4	20
125	17	4	21