



COR® Equivalency Element 15 (Yukon Supplement) Self Audit Checklist for New Applicants

Company Name:	Date:
Company Address:	Company Contact Person:
	Contact Person email:
Company Phone Number:	Company Fax Number:

Please fill out the checklist below and submit to the Northern Safety Network Yukon (NSNY) COR® Coordinator cor@yukonsafety.com

Element 15 – Part A: Health & Safety Committee/Representative

QUESTION #	ELEMENT 15 – YUKON SUPPLEMENT – PART A: H&S COMMITTEE/REP	GUIDELINE	ANSWER
15.1 A	Will your project in the Yukon require the assembly of a Health & Safety Committee?	Refer to sections 36-43 of the Workers’ Safety & Compensation Act Determine whether your project in Yukon will most likely require the assembly of a H&S Committee to be compliant with legislation.	<input type="checkbox"/> YES: skip question 15.2 <input type="checkbox"/> NO:
15.1 B	Will your project in the Yukon require a Safety Representative to be compliant?	Refer to sections 36-43 of the Workers’ Safety & Compensation Act Determine whether your project in Yukon will most likely require a Safety Representative to be compliant with legislation.	<input type="checkbox"/> YES <input type="checkbox"/> NO: mark questions 15.2 – 15.8 as “N/A” (Not applicable)
15.2	As the Employer, are you willing to train the appropriate personnel in how to carry out their duties and responsibilities as they relate to being the Safety Representative or on the H&S Committee	H&S Committee co-chairs or the Safety Representative must have received recognized training (as provided by NSNY, Health & Safety Committee/ Health & Safety Rep Training). Additionally, one H&S committee member must receive training in incident investigations (as provided by NSNY, Workplace Investigation Basics).	<input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A



15.3	Will H&S Committee meeting minutes or the Safety Representative's records be posted or made readily available for all employees to read?	Records must be kept of all activities including workplace inspections, meetings, investigations etc. Records can be forms or personal notebooks. Confirm that the H&S Committee meeting minutes or the Safety Representative records will be made available to all employees.	<input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A
15.4	Will both management and workers be represented on the H&S Committee?	There must be representation from management and the workers on the committee; there can be more workers than management but not more management than workers. Management can be appointed or selected, but worker representatives must be selected by the workers they represent.	<input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A: Our project will most likely not require the establishment of a H&S Committee
15.5	Will H&S Committee members or Safety Representative perform monthly inspections of the workplace?	When undergoing your audit, your auditor will check records to ensure workplace inspections are performed monthly and involve the H&S Committee or Safety Representative.	<input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A
15.6	Will the H&S Committee meet at least once per month?	When undergoing your audit, your auditor will check your records to ensure the H&S Committee meets at least once per month.	<input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A: Our project will most likely not require the establishment of a JHSC
15.7	Will the H&S Committee or the Safety Representative review all accident/incident reports and make recommendations for H&S improvements?	The H&S Committee or Safety Representative is required to review all accidents, incidents and investigations and make recommendations for improvements.	<input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A



15.8	Will the recommendations made by the JHSC or Safety Representative be acted on by management?	Verify that management will act upon the recommendations/hazardous situations provided by the H&S Committee/Safety Representative.	<input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A
QUESTION #	ELEMENT 15 – YUKON SUPPLEMENT – PART B: RETURN TO WORK (RTW)	GUIDELINE	ANSWER
15.9 & 15.10	As the Employer, are you willing to have a RTW program that is appropriate and relevant to your company and clearly states who is responsible for managing program?	A RTW policy should be posted or made available and be signed by current senior management and include a statement relating to management’s commitment to their RTW program. The program should also clearly state who is responsible for managing the program and state what the responsibilities entail.	<input type="checkbox"/> YES <input type="checkbox"/> NO
15.11	As the Employer, are you willing to have the appropriate personnel complete the formal RTW training?	An appropriate management person is required to attend the NSNY RTW for Large/Small Business & Basics of Workers’ Compensation	<input type="checkbox"/> YES <input type="checkbox"/> NO
15.12	As the Employer, are you willing to train employees in RTW?	All employees must receive RTW training in regards to the program and their responsibilities (e.g. orientation). Annual RTW training must also be provided to all employees (e.g. safety meetings, in-house training, etc.).	<input type="checkbox"/> YES <input type="checkbox"/> NO
15.13	Will the RTW policy be posted or made available to employees?	You must have a RTW policy that has been signed and dated by current senior management. The auditor will look to see if the policy is posted or made available to employees.	<input type="checkbox"/> YES <input type="checkbox"/> NO
15.14	Will the roles and responsibilities be clearly defined in the RTW program/policy?	The RTW program/policy must state the roles and responsibilities of the person responsible for the RTW program.	<input type="checkbox"/> YES <input type="checkbox"/> NO
15.15	Will the RTW process contain steps to be followed as part of the RTW program?	There must be specific instructions in the RTW process that outline the worker’s responsibilities if an injury occurs.	<input type="checkbox"/> YES <input type="checkbox"/> NO



15.16	Will your RTW process contain steps for maintaining communication with the injured worker?	The RTW process should have a written process that outlines the frequency and methods of on-going communication throughout the period of the worker's recovery.	<input type="checkbox"/> YES <input type="checkbox"/> NO
15.17	Will you ensure that proper steps (as outlined in your RTW plan) will be followed if a worker is injured?	If an injury occurs in your workplace, the auditor will look for evidence that you implemented your RTW plan following the injury	<input type="checkbox"/> YES <input type="checkbox"/> NO
15.18	Will you make changes or improvements to your RTW program following an evaluation?	The auditor will look for documentation that shows corrective action(s) have been made following the evaluation of the RTW program or from the use of the DSMA tool.	<input type="checkbox"/> YES <input type="checkbox"/> NO
15.19	Will there be a written process for the collection and protection of private information as part of the RTW program?	The RTW program must contain information/steps that clearly define the collection and use of personal information (see Worker' Compensation Act, section 42(3)).	<input type="checkbox"/> YES <input type="checkbox"/> NO
15.20	Will you instruct relevant personnel on privacy issues?	The auditor will look for records which show that the employer has given employees instruction on privacy issues related to the RTW program (e.g. meeting minutes, orientation, newsletters, etc.).	<input type="checkbox"/> YES <input type="checkbox"/> NO
QUESTION #	ELEMENT 15 – YUKON SUPPLEMENT – PART C: WORKPLACE VIOLENCE & HARASSMENT PREVENTION	GUIDELINE	ANSWER
15.21	Will there be a written policy and procedures in place for the prevention of Violence and Harassment in the workplace?	There must be a policy statement and procedures for the prevention and control of violence and harassment in the workplace that meets or exceeds current WHS legislation (19.01 – 19.03). Policy should be signed by current senior management.	<input type="checkbox"/> YES <input type="checkbox"/> NO
15.22	As the Employer, are you willing to train employees (supervisors / workers) on workplace Violence and Harassment prevention?	Supervisors/workers) must receive in-house Violence and Harassment training (e.g. during orientation, safety meetings, presentations, newsletters, NSNY Workplace Harassment & Violence Prevention course, etc.).	<input type="checkbox"/> YES <input type="checkbox"/> NO



To the best of my knowledge, the information I provided in this checklist is true and accurate: YES NO

Name of Company Senior Manager or Company Designate (please print):

Signature of Senior Manager or Company Designate:

Date:

For NSNY Office Use Only

Self-Audit Checklist approved: YES NO

COR[®] Equivalency Application form received: YES NO

COR[®] Certificate from home jurisdiction received: YES NO

LOGS received: YES NO

COR[®] Equivalency ISSUED: YES NO

