



Element 1: Objective and Scope

COR Policy Statement

The Service and Hospitality Safety Association is committed to the development, implementation and continuous improvement of health and safety management systems for the stakeholders in the S21, S22, and S23 codes in Saskatchewan. To this end, the SHSA 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). Once the audit is completed, the auditor will forward their recommendation for a certificate to be issued to the organization. The certificate will remain valid so long as the organization continues to comply with the standards set out in this document.

The SHSA employees will abide by and conduct themselves in accordance with the Auditor Code of Ethics that has been developed for the COR Program.

Element 2: Auditor Skill Requirements

In order to ensure that the COR Program maintains credibility, SHSA external auditors will need to meet certain requirements. They are outlined below.

1. Auditors may be deemed competent by the Chief Executive Officer (CEO) based on credentials and/or previous auditing experience.
2. Auditors may be subject to an interview to determine their level of knowledge and experience of the industry, auditing and safety management.
3. Auditors must complete one audit acting as lead auditor with an approved SHSA auditor evaluating their performance.

Once all of the above has been satisfactorily completed, SHSA will make a determination as to whether the auditor will be accredited. SHSA 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 in order to ensure the COR Program External Auditors conduct themselves appropriately. SHSA sees two important issues surrounding this element of the program. They are:

- Conflict of Interest
- Breach of Ethics

Conflict of Interest

All SHSA External Auditors are required to complete a Conflict of Interest Disclosure prior to 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 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 development and/or implementation of the safety management system being 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 immediately be investigated by the SHSA CEO. 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 were 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, SHSA will schedule another audit to take place within ten working days.

Appeals to Board of Directors

Every appeal must first go through to the CEO of SHSA to review and handle. The Board of Directors, made up of 11 members will be contacted second. Any appeals to the decision of the CEO 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 Board, 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 Board of Directors must reach a majority decision, and it will be final. Any disciplinary actions handed out remain in effect until the Board reaches their decision. Should the Board rule against the CEO, all actions will be removed from the affected parties.

Element 4: Auditee Requirements

In order for a certification audit to be completed by the Service and Hospitality Safety Association, the Auditee must first submit a request in writing. This request will include the following:

1. The complete business name of the organization making the request, including phone, fax and WCB account numbers.
2. The number of persons employed at the organizations.
3. A completed Safety Management System Self Assessment which can be requested from SHSA at any time.
4. A copy of the current Safety Manual.
5. A statement reflecting the organizations commitment to provide adequate resources for the audit to be completed.
6. The scope of the audit (which worksites are to be audited).
7. The name and contact information of the person requesting the audit on the organization's behalf

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 SHSA for the COR Program is the SHSA COR Audit Tool. It has been designed specifically for the S21, S22, and S23 industry using the guidelines set forth by the Saskatchewan Joint industry Committee.

Element 6: Audit Process

The Service and Hospitality Safety Association will determine which companies are eligible for participation in the COR Program using their WCB account numbers. Only members within our prescribed rate code may enroll. 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 including identification of which facilities or processes are to be audited
- Dates and places 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 will have a wrap up meeting to discuss their findings with the organization. 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. The score has been set as follows:

- 45% documentation
- 23% observation
- 32% interview

In order for an organization to receive certification, they must achieve an overall score of at least 80%, with a minimum of 50% in each element of the audit tool.

Element 8: Audit Approval

Within 7 days of completion, the certification audits are forwarded to the CEO. The CEO reviews the document to ensure it has been used correctly and the score is accurate.

Organizations who 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 develop an action plan for the element(s) where any shortfall exists. An outline of improvement activities for these elements should be reviewed by SHSA. To assess improvements, a limited scope audit will be conducted on these elements three (3) months from the date the action plan is submitted to SHSA.

Element 9: Certification Length

Once certification has been received, it will be valid for a conditional time period based on the organization maintaining their responsibilities as outlined in this document. COR certification may be suspended at any time if these requirements are not properly followed. SHSA reserves the right to audit a plant at any time. Organizations will be given 30 days notice prior to 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

Element 10: Certification Maintenance

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

SHSA Responsibilities

1. Track which organizations have certification along with their next audit dates.
2. Send notification to organizations 1 month prior to their next audit.
3. Issue certificates in a timely fashion.
4. Provide training to assist 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.

Audit Client Responsibilities

1. Inform SHSA of any changes to the operation or organizational structure.
2. Inform SHSA of changes for COR contacts
3. Inform SHSA of any disabling or fatal injuries
4. Complete an internal audit/maintenance survey annually
5. Continuously improve their health and safety performance

Any disabling or fatal injury will require an immediate investigation by the certified organization. This investigation, complete with corrective actions must be forwarded to the Association for review by the CEO. This information will be used to determine whether another certification audit will be conducted. Orders that are issued by regulatory bodies will require notification to the Association also. They must be accompanied by an action plan for the removal of the contravention.

Internal audits are required to be sent to the Association and will be reviewed by SHSA staff. If an internal audit cannot be provided when due, certification may be suspended. Any circumstances that may hinder an organizations ability to complete the required internal audit

must be divulged to the Association as soon as they are noted. SHSA will then work with the organization to find a solution.

Should a certificate be suspended, the offending organization must go through the application process again. They will be required to send an internal audit with a completed action plan before being scheduled for another certification audit. Should a certificate lapse, the organization must complete the application process again.

Element 11: Change Notification

The Service and Hospitality Safety Association recognize that over time organizations evolve and change. This may have an effect on the certificate that a particular organization may possess. For this reason, the Association must be notified of any changes to:

- The scope of the operation, or significant changes
- Ownership of the organization

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

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 CEO first adjourn and hear their case. If the decision of the CEO does not appeal to the Association, the Board of Directors may be contacted next to review the case. A meeting will be set within 60 days of receiving the complaint. All affected parties will then be notified of the date and location of the meeting. The CEO/Board will hear the evidence provided and forward recommendations within 7 days of the meeting.

Element 13: COR Program Overview

The COR Program will be evaluated by the Board of Directors 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 SHSA

staff is held accountable to the industry. Once the review is complete, recommendations shall be forwarded to the COR Director within 14 days.