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PURPOSE AND SCOPE

The University of Calgary (University) is committed to providing a safe and healthy environment for its employees, students, visitors and contractors in accordance with the University's Occupational Health and Safety (OHS) Policy and applicable legislation.

The University meets or exceeds the legislated requirements provided under the Alberta Occupational Health and Safety Act, Regulation and Code.

All contractors conducting work for or on behalf of the University are required to meet or exceed all applicable legislation including the Alberta Occupational Health and Safety Act, Regulation and Code. Contractors must also meet or exceed requirements set out in applicable University safety programs.

This Contractor Safety Management Program applies to all contractors, including prime contractors, conducting physical work at the University such as construction and maintenance activities. It does not apply to consultants or contract employees such as contract instructors.

Contractor occupational health and safety performance is a factor in the awarding and renewal of University contracts.

This program applies to all faculties and units at University of Calgary who hire contractors.

DEFINITIONS

Contractor – a person or company employed by the University that is directly involved in the execution of work under a contract with the University.

Contractor Representative – a representative of the University who is accountable for managing the Contractor.

Prime Contractor – contractor responsible for coordinating health and safety management systems of multiple employers and to do what is reasonably practicable to ensure that OH&S legislation is complied with on the worksite. The duties of a prime contractor are set out in the Alberta Occupational Health and Safety Act.

ROLES AND RESPONSIBILITIES

Contractor Representative

Contractor Representatives are representatives of the University. The Contractor Representative may hold one of the following roles:

- Program Manager
- Project Manager or Coordinator
- Facilities or Zone Manager
- Maintenance Supervisor
- Departmental or Faculty hiring manager

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A Contractor Representative MUST be designated for all contractors working at the University. A key role of the Contractor Representative is to ensure that this contractor safety management program is followed.

When the contractor is a prime contractor, the specific responsibilities of the Contractor Representative includes ensuring:

- A construction kick-off meeting is held.
- The contractor is aware of their safety management responsibilities for their subcontractors.
- The contractor is aware of the requirement for workers to take the University safety orientation.
- The contractor is aware of University safety programs and their obligation to meet or exceed the requirements of applicable programs.
- The contractor's safety management system is being executed as documented with a focus on hazard assessments, inspections, safety meetings, orientations, and incident management.
- Monthly reporting to the university includes the required safety information and there is appropriate follow up based on the monthly reporting.
- A project posting form is posted at each entrance to the worksite.
- Safety issues arising from the work of the contractor are resolved.
- A post-job contractor evaluation is conducted as required by this program.

When University is the prime contractor or there is no prime contractor, the specific responsibilities of the Contractor Representative includes ensuring:

- Contractor workers take the University's safety orientation.
- The contractor is informed of their health and safety responsibilities and performance accountability.
- The contractor is aware of University safety programs and their obligation to meet or exceed the requirements of applicable programs.
- Project kick-off meetings are conducted and recorded.
- Safety Issues arising from the work of the contractor are resolved.
- A project posting form is posted at each entrance to the worksite.
- All incidents and injuries are reporting in OARS and investigated.

Environment Health and Safety Department

- Establish content and delivery process for the University contractor safety orientation.
- Advise and assist Contractor Representatives as necessary to resolve health and safety issues.
- Immediately communicate all health and safety concerns to the appropriate University Representative, site supervisor and/or Contractor Representative.
- Support the pre-qualification of contractors.
- Process ISN exception and variance requests.

Supply Chain Management

- Manage ISNetwork process.
- Develop contracting strategy regarding prime contractor with project proponent.
- Ensure the tender documents contain prime contractor designation for the work.
- Ensure contract holds contractor accountable to meet University safety requirements and the contractors documented safety management system.

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Contractor

General Role

- Establish safety accountability of its employees and subcontractors and demonstrate visible safety leadership.
- Be familiar with University Safety Programs and meet or exceed the requirements of applicable programs.
- Maintain ISNetworld account to University standard.

Role when contractor is designated as the prime contractor for the project:

- Ensures that a project specific safety orientation is conducted prior to work commencing with contractor and sub-contractor workers.
- Ensures workers have received University contractor safety orientation training.
- Communicates to contractor and sub-contractor workers their health and safety responsibilities and performance accountability.
- Ensures Field Level Hazard Assessments are completed.
- Provides the necessary level of supervision during execution of work.
- Immediately notifies the university whenever an EHS incident occurs that must be reported to an external regulatory agency.
- Ensures Joint Worksite Health and Safety Committees are established when required.
- Executes their safety management system as documented.
- Performs periodic documented worksite safety inspections.
- Collaborates with workers to resolve safety issues reported or otherwise identified.
- Takes the appropriate steps when a violation of health and safety requirements is identified.
- Completes a Project Posting Form and posts it at each entrance to the worksite.
- Investigates all incidents / injuries that occur at the worksite.
- Submits a summary report of leading and lagging indicators to the University Contractor Representative on a monthly basis.

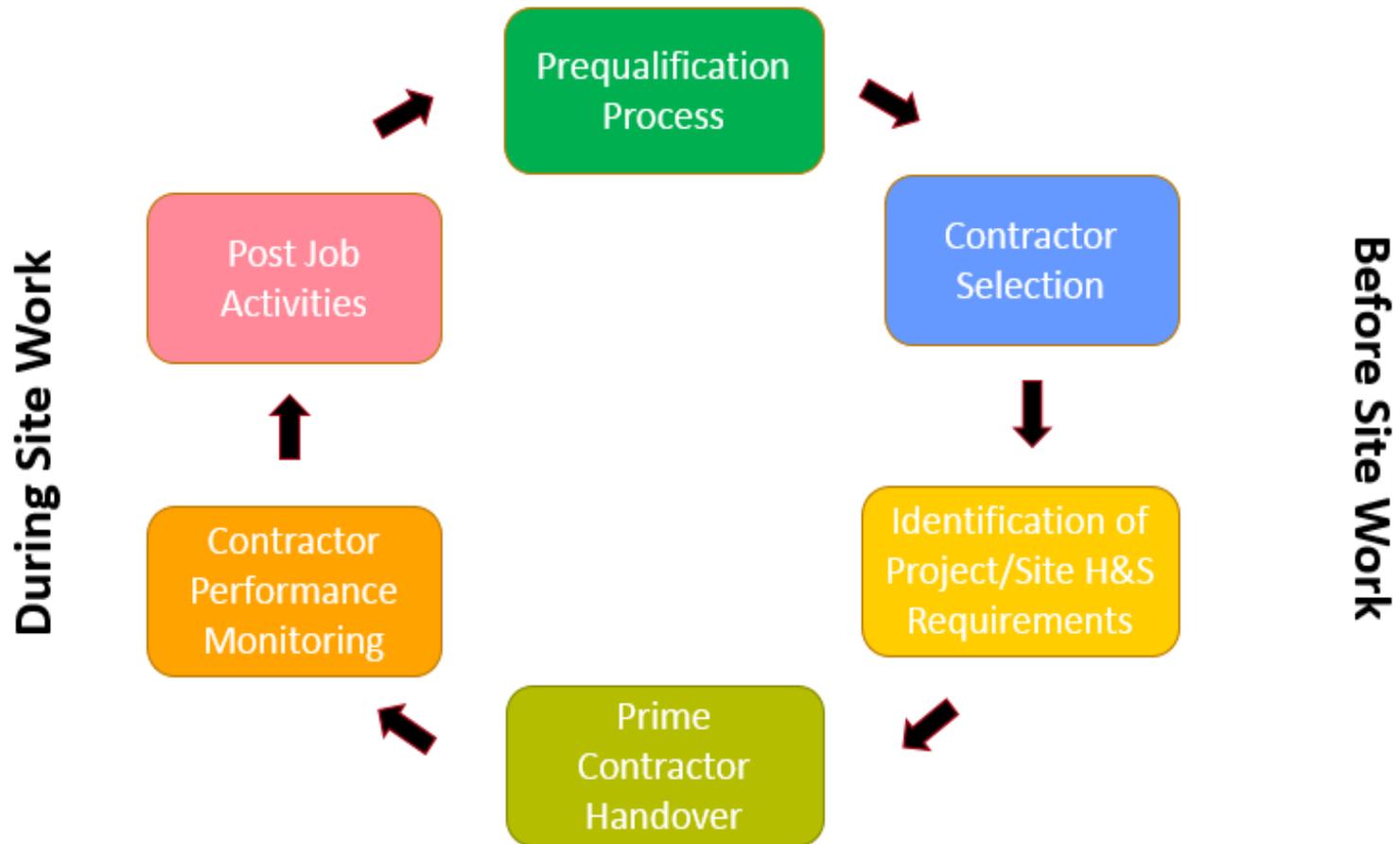
Role when university is designated as the prime contractor or there is no prime contractor for the work/project:

- Ensures their workers have received University contractor safety orientation training.
- Communicates to their contractor employees their health and safety responsibilities and performance accountability.
- Ensures Field Level Hazard Assessments are completed.
- Provides the necessary level of supervision during execution of work.
- Notifies the University (Contractor Representative) whenever a safety incident occurs, including first aid, medical aid and lost time incidents.
- Executes their safety management system as documented in ISN or otherwise submitted to the university.
- Collaborates with workers to resolve safety issues.
- Takes the appropriate steps when a violation of health and safety requirements is identified.
- Completes a Project Posting Form and posts it at each entrance to the worksite.

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CONTRACTOR SAFETY MANAGEMENT PROCESS

There are six stages to the University's Contractor Safety Management Process:



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CONTRACTOR PREQUALIFICATION

Prequalification is the process of assessing a contractor's EHS related information to determine the state of their management system as well as their performance. The University uses the ISNetwork process to prequalify contractors from an EHS standpoint. The EHS Department is responsible to establish the criteria against which contractors are assessed. The SCM department manages the ISNetwork process. The University does not prequalify contractors that are subcontractors to direct contractors of the University and therefore these subcontractors are not required to subscribe to ISNetwork.

ISN Subscription Requirements

Each contractor subscribed to ISNetwork is given an overall grade (A, B, C, D, or F) based on their performance history, specific safety programs, Workers Compensation Rate, Certificate of Recognition (COR) status, and insurance.

If a Contractor is not subscribed to ISNetwork (or subscribed but not connected to the University), then SCM may connect the vendor to the University in ISNetwork. It usually takes 1-2 business day(s) to connect a contractor in ISNetwork. The contractor will then provide the required information and be assessed against the University's ISNetwork evaluation criteria. For efficiency, there is a strong preference that all contractors require a subscription to ISNetwork prior to bidding for work at the University of Calgary.

ISNetwork Contractor Exception Process

If the project proponent wishes to use a contractor that is not in the ISNetwork system and will not subscribe to the ISNetwork system then a Contractor Exception Form (Appendix A) is completed by the project proponent or EHS representative. To grant an exception, the Exception Process will call for safety prequalification information to be collected from the contractor (Insurance, WCB rate, COR, safety performance, safety management system, etc). The contractor will be required to complete the Contractor Prequalification Form (Appendix B) to enable the University to collect this information. The information contained in the Contractor Prequalification form will be used to determine whether to grant an exception. When a contractor is required to address an emergency situation there may not be time for the contractor to complete the Contractor Prequalification Form and this would be taken into account by the approvers of the Contractor Exception.

The Contractor Exception Form may call for a higher level of University oversight of the contractor than normal. The Contractor Exception form must be approved by an EHS Department Manager/Director and a Director level representative in the Business Unit/Faculty that would be managing the contractor. These approvals may be indicated by email or by signing the Contractor Exception Form. Contractor exceptions are not permitted for prime contractors. All prime contractors must subscribe to ISNetwork.

ISNetwork Contractor Variance Process

If the project proponent wishes to use a contractor that is in the ISNetwork system but does not have the required standing in ISNetwork, then an ISNetwork Variance Request Form (Appendix C) is completed by the project proponent or EHS representative. The Variance Request Form will identify mitigating factors in the contractor's ISNetwork rating (e.g. high injury frequency rate but small company so based on few exposure hours) and any improvement measures the company must take to be employed by the University. The Variance Process may call for a higher level of University oversight

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of the contractor than normal. The ISNetwork Variance Request must be approved by an EHS Department Manager/Director and a Director level representative in the Business Unit/Faculty that would be managing the contractor. These approvals may be indicated by email or by signing the Contractor Variance Form. If the Variance Request calls for the contractor to take measures to improve their safety management processes then there must agreement from the contractor in writing.

Contractor Prequalification Stage Summary



| Requirements | Evaluate prospective contractors/vendors for compliance with safety requirements, prior to awarding of work | Prime | Not Prime |
|----------------------|---|--|--|
| Action | <ul style="list-style-type: none"> Contractor is qualified through the ISNetwork System or Contractor qualified through ISN Exception Process or Contractor qualified through ISN Variance Process | <ul style="list-style-type: none"> ✓ ✓ ✓ | <ul style="list-style-type: none"> ✓ ✓ ✓ |
| Documentation | <ul style="list-style-type: none"> Materials submitted by contractor and housed in ISNetwork system. Contractor Exception Form Contractor Pre-Qualification Form Contractor Variance Form | <ul style="list-style-type: none"> ✓ ✓ ✓ ✓ | <ul style="list-style-type: none"> ✓ ✓ ✓ ✓ |

CONTRACTOR SELECTION

Tender documents are to be prepared informing bidders of:

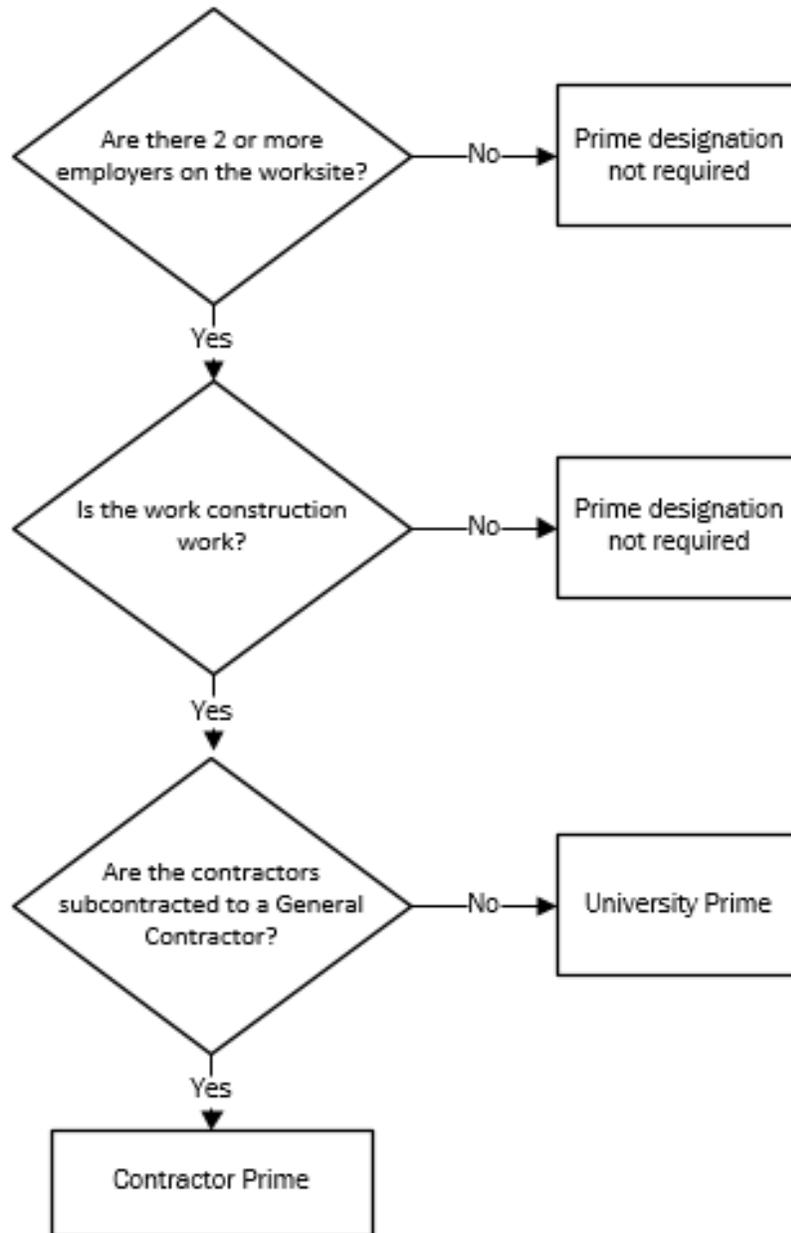
- Whether contractor will be prime contractor.
- University safety requirements.
- Hazards associated with the University site and infrastructure.

Determination of Prime Contractor

Where a prime contractor is required, the University may designate prime contractor status and associated responsibilities to a contractor by written agreement. The University will determine if a prime contractor is required and if so whether the contractor will be prime before the tender documents are prepared. Whether or not the contractor will be prime is included in the tender documents because it may affect the bid of the contractor.

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Reference the decision tree below to determine designation of Prime Contractor.



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Safety Requirements Conveyed in Contract/PO

The following items must be conveyed to the contractor in writing as part of the Contractor or Purchase Order.

- Contractor must meet all applicable Occupational Health and Safety regulatory requirements.
- Contractor companies will be held accountable to execute their management system as presented in their ISNetwork materials and any other submissions made to the University.
- The contractor must immediately report to the Contractor Representative all incidents that are required to be reported to external agencies.
- The University has the right to conduct investigations into contractor safety or environmental incidents.
- If contractor is required to submit a document to Alberta OHS the University has right to review it in advance.
- The contractor must report immediately any on-site visit by an OHS Officer.
- The University has right to conduct inspections and audits of a contractor's worksite.
- If a contractor worker appears not to be fit for work, the University has the right to request the contractor to investigate and report on the outcome of the investigation to the University.
- Contractors must meet or exceed program requirements from the list of University programs set out in the ISNetwork system.
- Contractors must not use the University's tools and equipment unless written authorization is obtained from the University.

Contractor Selection Stage Summary



| Requirements | Identify contractor(s) who are most qualified for the scope of work and have an acceptable safety performance record | Prime | Not Prime |
|----------------------|---|-------|-----------|
| Action | <ul style="list-style-type: none"> • Tender documents issued indicating: <ul style="list-style-type: none"> -whether Contractor is to be prime -requirement to follow U of C safety program -requirements (Fall Protection, Powered Mobile Equipment, etc.) • Contract awarded with Safety Appendix • PO issued with Safety Requirements | ✓ | ✓ |
| Documentation | <ul style="list-style-type: none"> • Tender documents • Contract with service provider • PO with service provider | ✓ | ✓ |

IDENTIFICATION OF PROJECT/SITE H&S REQUIREMENTS

University Safety Orientation

All contractor workers including subcontractor workers are required to complete the University's on-line safety orientation. A classroom session is also available for contractor workers unable to take the on-line orientation. This orientation informs contractor workers of University policies, procedures, and potential hazards. Orientation records from the on-line orientation must be maintained by the contractor company and made available to the university upon request for verification purposes. When laboratories are part of the worksite, a laboratory tour shall be conducted by or arranged by the contractor representative as part of the construction/field work kick-off to ensure that the contractors

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are informed of hazards at the work site.

Contractor Prime—Hazards Associated with University Infrastructure/Setting

When the Contractor is prime, the University will communicate to the contractor the site hazards that the University is aware of associated with University infrastructure. These hazards will be communicated to the contractor using the form contained in Appendix H—Worksite Hazards Associated with University Infrastructure/Setting. The contractor is expected to establish controls related to the identified hazards.

Contractor Prime—Contractor Emergency Response Plan

When the contractor is prime, the contractor shall provide the University with a site-specific emergency response plan that meets the standards outlined in the National Fire Code – Alberta Edition.

Contractor Prime—Construction Kick-off Meeting

A construction kick-off meeting will be held with the contractor to:

- Review contractor responsibilities.
- Outline reporting requirements from the contractor.
- Identify University safety programs and permit requirements that apply to the work.

Appendix E is the kick-off meeting agenda form that is to be completed and signed by both the University Representative and a representative of the Contractor at the time of the meeting.

Contractor is Not Prime—Field Work Kick-off Meeting

For all contractors that are new to the University a field work kick-off meeting will be held with the contractor. The Kick-Off Meeting Agenda form (Appendix E) will be used to guide the agenda for the meeting and serve a record that the meeting was held. If a contractor is on-site continuously or regularly to conduct the same type of work, instead of kick-off meetings there shall be safety review meetings held at least annually. The items covered at these meetings shall include:

- Review of any safety incidents and follow up.
- Review of conformance to University safety programs that apply to the work.
- Review of any safety inspection results.
- Any safety improvement opportunities identified by either the contractor or the University.

Contractor is not Prime—Hazards Associated with University Infrastructure/Setting

When the Contractor is not prime, the University Representative will communicate to the contractor the site hazards that the University is aware of associated with University infrastructure. These hazards will be communicated to the contractor using the form contained in Appendix H—Worksite Hazards Associated with University Infrastructure/Setting. The contractor is expected follow all university programs establishing controls related to the identified hazards.

Contractor is not Prime—Contractor Emergency Response Plan

Where the contractor is not prime, the University Representative must supply a copy of the Emergency Response plan for the area work is to be conducted.

Identification of Project/Site H&S Requirements Stage Summary



| Requirements | Provide knowledge of workplace and hazards to Contractors | Prime | Not Prime |
|----------------------|--|--|--|
| Action | Contractor <ul style="list-style-type: none"> Ensures workers take University safety orientation Provide University with emergency response plan University <ul style="list-style-type: none"> Provides hazards associated with University infrastructure document Hold site work kick-off meeting | <ul style="list-style-type: none"> ✓ ✓ ✓ ✓ | <ul style="list-style-type: none"> ✓ |
| Documentation | <ul style="list-style-type: none"> Orientation certificates issued through ISN Emergency response plan Hazards associated with University infrastructure document Kick-off meeting document/minutes | <ul style="list-style-type: none"> ✓ ✓ ✓ ✓ | <ul style="list-style-type: none"> ✓ ✓ |

PRIME CONTRACTOR HANDOVER

The following requirements apply to Contractor's that have been assigned the role of Prime Contractor.

Project Signage

A Project Posting Form must be completed and posted at the worksite. The Form is included as Appendix D and contains information on the time period over which the work is to be conducted, the University contacts for the project and the contractor contacts for the project. The Contractor must also post signage at the worksite indicating that the Contractor is prime.

Prime Contractor Handover Document

A Prime Contractor Handover Document form is included as Appendix F. The document specifies the geographic area of the worksite which is subject to the handover to the Prime Contractor. The Prime Contractor Worksite shall ideally be indicated by a continuous visible boundary such as fencing. When a continuous visible boundary is not possible, structures or other physical markings may be used. The description of the boundaries of the worksite to be handed over to the Prime Contractor must be agreed to in writing by the University and the Prime Contractor in the handover document.

Worksite Safety Orientations

In addition to the University of Calgary on-line safety orientation that all contractor workers must take, the Contractor is required to conduct orientations for all workers conducting work on a worksite for which the Contractor is prime. This orientation will inform workers of the specific hazards of the worksite and the measures to control those hazards, emergency response plans, and key elements of the Contractor's safety management system. Records must be retained to demonstrate that all workers on the Contractor's worksite have successfully taken the Contractor's worksite safety orientation.

Worksite Access

The Contractor must establish and maintain Check-In areas to the Contractor's worksite with appropriate signage. The Contractor must require all persons entering the worksite to register at a check-in area. At the time of check-in, the Contractor shall communicate to them:

- Its role as Prime Contractor for the worksite.

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- Existing and potential hazards at the worksite and the means by which those hazards shall be eliminated or controlled.
- The Contractor’s health and safety requirements for the worksite.

Prime Contractor Handover Summary



| Requirements | Maintain constant communication with Contractor | Prime | Not Prime |
|----------------------|---|-----------------------|-----------|
| Action | Contractor <ul style="list-style-type: none"> • Establish visible boundary of area to be handed over to Prime Contractor • Installs job posting form and signage at worksite indicating contractor is prime • Establish and maintain check-in areas/process • Conduct worksite specific orientations for workers University <ul style="list-style-type: none"> • Prepares Prime Contractor Handover Document | ✓ ✓ ✓ ✓ ✓ | |
| Documentation | <ul style="list-style-type: none"> • Prime Contractor handover document • Worksite orientation records | ✓ ✓ | |

CONTRACTOR PERFORMANCE MONITORING

When Contractor is Prime

Inspections by Prime Contractors

All prime contractors are required to perform regular worksite safety inspections. The written inspection must document any necessary actions to be taken, who is responsible for completion of those actions, and anticipated timelines to correct any identified unsafe conditions and/or work practices. The inspection process must include a follow-up process to ensure previously identified unsafe conditions and/or work practices are corrected. The contractor may be required to demonstrate due diligence by confirming that corrective actions were completed in a timely manner. These reports must be available for review upon request by the University.

The University, upon request, may attend periodic inspections performed by prime contractors for the purposes of fulfilling owner safety responsibilities and to ensure the protection of University public spaces, its workers and students, and the public at large.

Incident Reporting and Investigation

All incidents resulting in an injury or environmental release must be investigated by the prime contractor.

The prime contractor must immediately report to the Contractor Representative all incidents that are required to be reported to external agencies and provide copies of the associated incident investigation reports. The University has the right to conduct investigations into contractor safety and environmental incidents. If the prime contractor is required to submit an incident investigation report to Alberta OHS, the University has the right to review the report before submission. The prime contractor must also report immediately any on-site visit by an OHS Officer.

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Safety Reporting

Prime contractors must complete a leading and lagging indicator report on a monthly basis whenever the contractor is working continuously for a period in excess of one month. The specific information to be provided in the monthly report will be communicated to the Contractor through the ISNetworld system and the reporting shall be done through the ISNetworld system. The contractor representative shall use information from the prime contractor's safety reporting, other information gathered from attending project meetings, observations from site tours, and whatever other information gathering process may be necessary to assess whether the prime contractor is executing their EHS management system as documented.

Document Retention

All documents pertaining to project safety shall be retained for no less than 3 years after project completion and shall be reviewable upon request by the University.

When the Contractor is Not Prime

Inspections

Spot inspections are required to be conducted by the Contractor Representative in collaboration with the contractor and with support from the EHS Department as needed.

Within Facilities Management, one out of every 20 Work Requests involving contractors will undergo a spot safety inspection. Factors such as the hazards associated with the work and the contractor's ISNetworld standing will be included in the selection of the contractor being inspected. The Contractor Safety Inspection Checklist (Appendix G) shall be used when conducting these inspections and shall provide a record that the inspection occurred. Completed checklists shall be retained for a three year period.

When a recommendation is made to correct an unsafe act or condition that cannot be corrected at the time of the inspection, written documentation must be provided by the contractor to verify the correction of the unsafe act or condition.

Annual validations

For contractors who hold maintenance agreements with the University, a yearly validation of the contractor's insurance certifications and the hazards inherent in the university infrastructure must be conducted. An examination of the Contractor's ISN profile shall be done to assess the contractor's insurance certifications if they are connected to the University in the ISN service. If the Contractor has an ISN exemption, the Contractor Prequalification form (Appendix B) shall be forwarded to them for completion and reviewed.

Document Retention

All documents pertaining to project safety shall be retained for no less than 3 years after project completion and shall be held by the University Representative's department, reviewable upon request.

Incident Reporting and Investigation

The University of Calgary requires the reporting of all incidents to the contractor representative. This includes:

- Injury incidents-first aid, medical aid, lost time.

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- Environmental incidents (e.g. Release of hazardous materials to the environment).
- Near misses—unplanned events which under slightly different circumstances could cause or have caused an injury).

Appendix J contains the University’s incident classification standard which includes three levels of incidents based on severity. All three levels of incidents as described in the standard must be reported to the University immediately. The Contractor Representative is responsible for the classification of the incident, completing the reporting in the OARS system, and ensuring the investigation is completed.

Contractor Performance Monitoring Summary



| Requirements | Monitor Contractor’s activities during construction | Prime | Not Prime |
|----------------------|---|-------------------------|----------------|
| Action | Contractor <ul style="list-style-type: none"> • Submits monthly or project safety performance report through ISN • Reports to University all EHS incidents required to be reported to external agencies University <ul style="list-style-type: none"> • Conducts worksite inspections • May choose to audit | ✓ ✓ ✓ | ✓ |
| Documentation | <ul style="list-style-type: none"> • Inspection checklists • Audit reports • Contractor monthly safety performance reports • OARS Reports | ✓ ✓ | ✓ ✓ |

POST JOB ACTIVITIES

Post-Job Contractor Evaluation

A post-job evaluation will be conducted for all projects completed by a prime contractor when the value of the contract exceeds \$500,000. For prime contractor jobs less than \$500,000 and for non-prime contractors, post-job contractor performance evaluations will be done on an exception basis if there some safety issue that arises during the course of the work. The contractor performance evaluation may include:

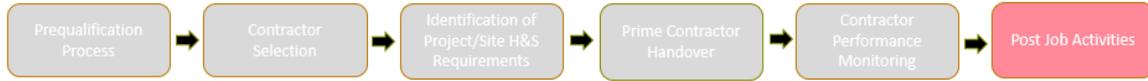
- Review of whether contract safety requirements were met.
- Review of hazard assessments.
- Review of incidents including corrective actions taken.
- Review of safety meeting minutes.
- Review of worksite inspection reports.
- Review of reported unsafe acts or unsafe conditions present while on University property and timeliness of corrective actions taken.

The University will review acceptable and non-acceptable performance with the Contractor and University stakeholders, including Facilities and other units/departments who may be responsible to select contractors to perform work in the future. If the University’s expectations are not met with regard to a Contractor’s EHS performance, the University will provide the Contractor with an

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opportunity to respond with corrective actions consistent with contractual provisions.

Post Job Activities Summary



| Requirements | Post Job | Prime | Not Prime |
|---------------|--|-------|-----------|
| Action | <ul style="list-style-type: none"> Post Job Contractor Evaluation on jobs >500K or by exception is safety issues arise | ✓ | ✓ |
| Documentation | <ul style="list-style-type: none"> Contractor evaluations housed in ISNetworld system | ✓ | ✓ |

LIST OF APPENDIXES

- Appendix A—ISNetworld Exception Request Form
- Appendix B—Contractor Pre-Qualification Form
- Appendix C—ISNetworld Variance Request Form
- Appendix D—Project Posting Form
- Appendix E—Kick-Off Meeting Agenda Form
- Appendix F—Prime Contractor Handover Document
- Appendix G—Contractor Safety Inspection Checklist
- Appendix H—Worksite Hazards Associated with University Infrastructure
- Appendix I—University Incident Classification Standard

REFERENCES

AB Occupation Health and Safety Act – Section 3 Prime Contractor
http://www.qp.alberta.ca/1266.cfm?page=002.cfm&leg_type=Acts&isbncln=9780779775699&display=html

AB Occupational Health and Safety Code – Sections 7(5), 178 (2), 178(3)
https://work.alberta.ca/documents/WHS-LEG_ohsc_2009.pdf

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| REQUEST FOR DEVIATION FROM UNIVERSITY OF CALGARY PRE-QUALIFIED/PREFERRED VENDOR LIST | | | |
|---|--|--|---|
| Date Click or tap here to enter text. | | | |
| Contractor Company Name Click or tap here to enter text. | | | |
| Contractor Contact Name and Title Click or tap here to enter text. | | | |
| Phone Number Click or tap here to enter text. | Email Address Click or tap here to enter text. | | |
| UCalgary Exception Click or tap here to enter text. | | | |
| Scope of Work Click or tap here to enter text. | | | |
| Reason for Exception Click or tap here to enter text. | | | |
| Location of Work with UCalgary Click or tap here to enter text. | | | |
| Has pre-qualification questionnaire been completed? <input type="checkbox"/> YES <input type="checkbox"/> NO | | | |
| Conditions Click or tap here to enter text. | | | |
| UCalgary Approver Name – Department/Faculty Director Click or tap here to enter text. | UCalgary Approver Title Click or tap here to enter text. | UCalgary Approver Signature Click or tap here to enter text. | Date Click or tap here to enter text. |
| UCalgary Approver Name – EHS Representative Click or tap here to enter text. | UCalgary Approver Title Click or tap here to enter text. | UCalgary Approver Signature Click or tap here to enter text. | Date Click or tap here to enter text. |

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| CONTRACTOR INFORMATION | | | | |
|--|----------------------------------|----------------------------------|--|----------------------------------|
| 1. Name of Company: Click or tap here to enter text. | | | | |
| Address: Click or tap here to enter text. | | | | |
| City: Click or tap here to enter text. | | | | |
| Province: Click or tap here to enter text. | | | Postal Code: Click or tap here to enter text. | |
| Phone: Click or tap here to enter text. | | | Fax: Click or tap here to enter text. | |
| 2. Contact For | Company Information | | Safety Information | |
| Name | Click or tap here to enter text. | | Click or tap here to enter text. | |
| Position | Click or tap here to enter text. | | Click or tap here to enter text. | |
| Telephone # | Click or tap here to enter text. | | Click or tap here to enter text. | |
| Cell # | Click or tap here to enter text. | | Click or tap here to enter text. | |
| Email Address | Click or tap here to enter text. | | Click or tap here to enter text. | |
| 3. Describe services provided: Click or tap here to enter text. | | | | |
| 4. List types of work normally sub-contracted by your company to others: Click or tap here to enter text. | | | | |
| HEALTH, SAFETY & ENVIRONMENT PERFORMANCE | | | | |
| This section must include current year and the last three years company injury statistics | | | | |
| 5. WCB Number: Click or tap here to enter text. | | | | |
| 6. Industry Code: Click or tap here to enter text. | | | Industry Classification: Click or tap here to enter text. | |
| 7. WCB Details | 2018 | 2017 | 2016 | 2015 |
| • Your Industry WCB Premium Rate | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. |
| • Employers WCB Premium Rate | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. |
| • Your Industry WCB Rate Adjustment, % | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. |
| • Surcharge or (Discount) on WCB Rate | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. |
| 8. Safety Statistics | | | | |
| • Number of Fatalities | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. |
| • Number of First Aid Injuries | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. |
| • Number of Medical Treatment Cases (MTC) | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. |
| • Number of Restricted Work Cases (RWC) | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. |
| • Number of Lost Time Injuries (LTI) | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. |
| • Exposure Hours | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. |
| • Average Number of Employees | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. |

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| | | | | |
|--|----------------------------------|----------------------------------|----------------------------------|----------------------------------|
| • Total Recordable Injury Frequency (TRF) | Click or tap here to enter text. |
| • Lost Time Injury Frequency (LTIF) | Click or tap here to enter text. |
| TRIF = # Recordables (MTC + RWC + LTI) x 200,000 / Exposure Hours | | | | |
| LTIF = # LTI x 200,000 / Exposure Hours | | | | |

| | | | |
|--|--|---|--|
| 9. Regulatory Compliance | | | |
| Has your company been cited, charged or prosecuted under the Provincial Occupational Health and Safety Act or the Provincial Environmental Enhancement and Protection Act in the last 3 years? <input type="checkbox"/> Yes (If yes, provide details below) <input type="checkbox"/> No | | | |
| 10. Alberta Certificate of Recognition (COR) | | | |
| Does your company have a Certificate of Recognition (COR/SECOR)? <input type="checkbox"/> Yes <input type="checkbox"/> No | | | |
| COR Certificate Number: Click or tap here to enter text. | | Date of Last External Audit: Click or tap here to enter text. | |
| HEALTH, SAFETY & ENVIRONMENT PROGRAM | | | |
| Management Commitment and Leadership | | | Yes No N/A |
| 1. Do you have a written HSE Policy Statement? | | | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| 2. Do you have clearly defined safety responsibilities for managers, supervisors, and workers? | | | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| 3. Do managers/supervisors visit the worksite? | | | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| How often? Click or tap here to enter text. | | | |
| 4. Do you evaluate your safety program to ensure it is effective and that all areas for improvement are identified? | | | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| How often? Click or tap here to enter text. | | | |
| Hazard Identification and Risk Assessment | | | Yes No N/A |
| 5. Do you conduct appropriate on-site and equipment inspections? | | | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| 6. Do you have a near miss reporting program? | | | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| 7. Do you have a hazard identification and assessment program? | | | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| 8. Do you have a preventive maintenance program for tools and equipment? | | | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| 9. Are workers involved with discussion regarding job/task specific hazards? | | | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| Rules and Work Procedures | | | Yes No N/A |
| 10. Do your workers have access to the OH&S Act, Regulation and Code? | | | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| 11. Do you have a disciplinary policy? | | | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| 12. Do you have specialized rules/practices in place for the following: | | | |
| a. Confined Space Entry? | | | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| b. Working at Heights? | | | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| c. Equipment Safety Devices? | | | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |

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| | | | |
|---|--------------------------|--------------------------|--------------------------|
| d. Flammable Materials? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| e. Materials Handling? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| f. WHMIS, TDG? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| g. Working Alone? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| h. Workplace Violence and Harassment? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| i. Drug and Alcohol? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| j. Respiratory Equipment – Respiratory Code of Practice? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| k. Ground Disturbance and Excavations? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| List any other work procedures with specialized rules/practices in place for your services or business. Click or tap here to enter text. | | | |
| 14. Do you have standard work procedures in place for critical or potentially high hazards/jobs? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 15. Do you have Personal Protective Equipment standards in place? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 16. Do you have a current Emergency Response Plan? | | | |
| Training | Yes | No | N/A |
| 17. Do you provide HSE, technical and/ or training to your company supervisors? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 18. Do you provide HSE and/or technical training to your workers? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 19. Do you provide on-the-job training to all employees? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 20. Do you keep training records for your workers? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 21. Do you offer a “New Employee Orientation Program”? If yes, does it include: | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| a. Safety Policies and Rules | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| b. Safety Meetings | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| c. Injury and Incident Reporting | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| d. First Aid and CPR Procedures | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| e. Housekeeping | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| f. Drug and Alcohol Policy | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| g. Working at Heights, Fall Protection | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| h. Fire Protection, Safety | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| i. Safe Driving | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| j. Toxic/Hazardous Substances | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| k. Lockout/Tag out | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| l. Emergency Equipment and Procedures | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Group Meetings | Yes | No | N/A |
| 22. Do you hold regular safety meetings, pre-job meetings and/or tailgate meetings? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Investigation and Analysis | Yes | No | N/A |
| 23. Do you have an incident reporting system in place? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 24. Do you have a procedure in place to investigate and follow-up on incidents? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Health and Environmental Controls | Yes | No | N/A |
| 25. Do you have a waste management policy or program? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

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| | | | |
|--|--------------------------|--------------------------|--------------------------|
| 26. Do you have a system in place to control hazardous materials that will be brought to, used on, and removed from the worksite? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 27. Are your company's worksites and procedures periodically audited by an accredited HSE auditor to measure the effectiveness of your HSE programs? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

| Subcontractors | Yes | No | N/A |
|---|--------------------------|--------------------------|--------------------------|
| 28. Do you have a program for managing subcontractors? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 29. Do you include subcontractors in your Health and Safety orientations? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Job Safety Analysis or Hazard Assessment? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Kick-off or Pre-job Meetings? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Inspections? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Incident Reporting and Investigation? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Safety Meetings? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 30. Do you verify on-site subcontractor's safety training records and trade certificates? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

INFORMATION SUBMITTAL

Copies of the following information must be returned in conjunction with this form.

| No. | Records, Statements or Forms | Verification by UC |
|------------|---|---------------------------|
| 1 | Completed Contractor Prequalification Form | <input type="checkbox"/> |
| 2 | WCB Premium Rate Statement | <input type="checkbox"/> |
| 3 | WCB Clearance Letter | <input type="checkbox"/> |
| 4 | Comprehensive General Liability Certificate of Insurance | <input type="checkbox"/> |
| 5 | Certificate of Recognition within the last three years | <input type="checkbox"/> |
| 6 | Company Environment, Health & Safety Manual | <input type="checkbox"/> |
| 7 | Example of completed Project Job Safety Analysis | <input type="checkbox"/> |
| 8 | Example of completed Field Level Hazard Assessment | <input type="checkbox"/> |
| 9 | Example of completed employee HSE Orientation Record | <input type="checkbox"/> |
| 10 | Outline of employees and supervisor HSE Training Program | <input type="checkbox"/> |
| 11 | Example of completed Incident Investigation Report (names redacted) | <input type="checkbox"/> |
| 12 | Example of completed planned HSE Inspection Check Sheet | <input type="checkbox"/> |

I hereby certify that all information on this questionnaire and attachments are true and accurate.

SIGNATURES REQUIRED

| | | |
|---|--|--|
| Contractor Representative Click or tap here to enter text. | Title and Contact Number Click or tap here to enter text. | Signature & Date Click or tap here to enter text. |
| Contractor HSE Representative Click or tap here to enter text. | Title and Contact Number Click or tap here to enter text. | Signature & Date Click or tap here to enter text. |

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APPENDIX C
ISN Variance Request Form
Contractor ISN Standing below Acceptable Grade

| VARIANCE INFORMATION | | | |
|--|--|--|----------------------------|
| Variance Requested For: Click or tap here to enter text. Company Name | | | |
| Contractor Contact Name and Title: Click or tap here to enter text. | | Current Date: Click or tap here to enter text. | |
| Contractor Phone Number: Click or tap here to enter text. | | Contractor Email Address: Click or tap here to enter text. | |
| Reason for variance (<i>e.g. emergency situation, tier classification, etc.</i>) Click or tap here to enter text. | | | |
| Variance control/ action plan (<i>provide de tails on additional controls, how these controls will be monitored, etc.</i>) Click or tap here to enter text. | | | |
| Expiration of variance (<i>when will the variance expire? under what condition?</i>) Click or tap here to enter text. | | | |
| UCalgary Approver Name – Department/Faculty Director Click or tap here to enter text. | UCalgary Approver Title Click or tap here to enter text. | UCalgary Approver Signature Click or tap here to enter text. | Date: YYYY.MM.DD |
| UCalgary Approver Name – EHS Representative Click or tap here to enter text. | UCalgary Approver Title Click or tap here to enter text. | UCalgary Approver Signature Click or tap here to enter text. | Date: YYYY.MM.DD |

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PROJECT/WORK REQUEST INFORMATION

| | |
|---------------------------|----------------------------------|
| Project/WR Number: | Click or tap here to enter text. |
| Project Location: | Click or tap here to enter text. |
| Start Date: | Click or tap here to enter text. |
| Completion Date: | Click or tap here to enter text. |
| Scope of Work: | Click or tap here to enter text. |

Emergency Contact: Campus Security: 403.220.5333

| | |
|---|----------------------------------|
| University Contractor Representative Name: | Click or tap here to enter text. |
| General Contract Company: | Click or tap here to enter text. |
| Contact Name: | Click or tap here to enter text. |
| Mobile Phone: | Click or tap here to enter text. |

Contact Phone: Click or tap here to enter text. **After Hours Phone:** Click or tap here to enter text.

CONTRACTOR INFORMATION
PRIMARY CONTACTS

| | |
|---|---|
| Contract Company: Click or tap here to enter text. | Mobile Phone: Click or tap here to enter text. |
| Contact Name: Click or tap here to enter text. | |
| Contract Company: Click or tap here to enter text. | Mobile Phone: Click or tap here to enter text. |
| Contact Name: Click or tap here to enter text. | |
| Contract Company: Click or tap here to enter text. | Mobile Phone: Click or tap here to enter text. |
| Contact Name: Click or tap here to enter text. | |
| Contract Company: Click or tap here to enter text. | Mobile Phone: Click or tap here to enter text. |
| Contact Name: Click or tap here to enter text. | |

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APPENDIX E
Kick-off Meeting Agenda Form

Date: Click or tap here to enter text.

Project: Click or tap here to enter text.

Contractor(s): Click or tap here to enter text.

Contractor Staff in Attendance:

Name: Click or tap here to enter text.

Signature: Click or tap here to enter text.

University Staff in Attendance:

Name: Click or tap here to enter text.

Signature: Click or tap here to enter text.

University Contractor Representatives:

Name: Click or tap here to enter text.

Signature: Click or tap here to enter text.

Agenda:

1. All workers have taken (or will take) the University of Calgary orientation training prior to starting work.
2. The contractor will provide their workers with an orientation to their specific worksite that will include emergency procedures.
3. All required hazard specific permits are obtained from the University of Calgary. Which of the following task specific permits are expected to be required for this work?
 - Confined space entry
 - Hot Work and Dust permit
 - Excavation/ground disturbance
4. Requirements of all University Safety Programs that apply to the work are either met or exceeded.

Which of the following University Safety Programs apply to the work?

| | |
|--------------------------|------------------------------|
| <input type="checkbox"/> | Asbestos Management Plan |
| <input type="checkbox"/> | Control of Hazardous Energy |
| <input type="checkbox"/> | Confined Space Entry Program |

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| | |
|--------------------------|---|
| <input type="checkbox"/> | Cranes, Hoists, and Lifting Devices Program |
| <input type="checkbox"/> | Fall Protection Program |
| <input type="checkbox"/> | Hot Work and Dust Program |
| <input type="checkbox"/> | Personal Protective Equipment Program |
| <input type="checkbox"/> | Powered Mobile Equipment Program |
| <input type="checkbox"/> | Ladder Safety |
| <input type="checkbox"/> | Overhead Power Lines |

5. Work practices shall be based on the contractor's submitted documentation including those materials submitted to the ISNetworld system.
6. The contractor will ensure their subcontractors meet University safety requirements.
7. University tools and equipment will not be used unless written permission is obtained from the University.
8. Vehicle and pedestrian foot traffic between the contractor's worksite and the University will be controlled.
9. All generated waste must be disposed of by the contractor in accordance with University guidelines.
10. The contractor understands what EHS incidents must be reported to the University.

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Forming part of, and to be interpreted in accordance with the Attachment 1 to Appendix "C" to the Independent Contractor Agreement (the "Agreement") between the Governors of the University of Calgary and [Click or tap here to enter text.](#)

Portion of work site subject to handover:

(Check one or both – map/diagram must be attached unless not reasonably available)

- Map/Diagram of PC Work Site
- Sketch/Boundary Description is attached

Handover:

From: [Click or tap here to enter text.](#)

To: [Click or tap here to enter text.](#)

Handover time and date:

Handover shall be effective as of:

Time: [Click or tap here to enter text.](#) AM PM [check one] Mountain Time

Date: [Click or tap here to enter text.](#)

This Prime Contractor Handover transfers the role of Prime Contractor FROM the Party specified in the Handover section of this document TO the Party specified in the Handover section of this document effective as of the Handover Time and Date. The Party to whom the Prime Contractor role is being transferred pursuant to this Handover Document agrees to accept the role of Prime Contractor as of the Handover Time and Date and to fulfill all the requirements of the role of Prime Contractor in accordance with, and for the period of time set out in, the Agreement.

Governors of the University of Calgary

(Signature of authorized person)

[Click or tap here to enter text.](#)

(Print Name)

[Click or tap here to enter text.](#)

(Title)

[Click or tap here to enter text.](#)

(Date)

[Click or tap here to enter text.](#)

Contractor

(Signature of authorized person)

[Click or tap here to enter text.](#)

(Print Name)

[Click or tap here to enter text.](#)

(Title)

[Click or tap here to enter text.](#)

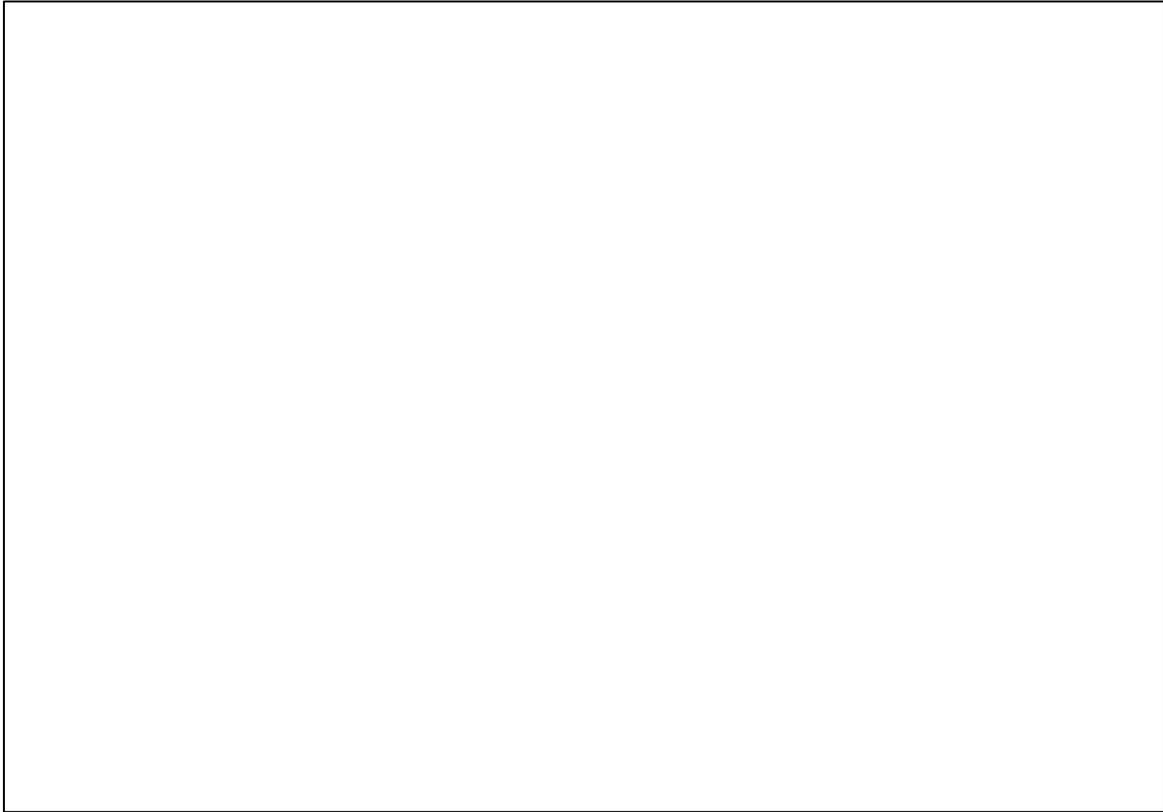
(Date)

[Click or tap here to enter text.](#)

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BOUNDARY DESCRIPTION: (If a map/diagram is not attached, reference all boundary markers here. If a map/diagram is attached, additional details of the PC Work Site boundary may be specified here for further clarity.

SKETCH OF APPLICABLE BOUNDARIES:



(Both authorized persons are to initial here)

Click or tap here to enter text.

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(When the University is Prime Contractor or there is no assigned Prime Contractor)

| | | | |
|-----------------|----------------------------------|-----------------------------|----------------------------------|
| Project | Click or tap here to enter text. | Contractor | Click or tap here to enter text. |
| Location | Click or tap here to enter text. | Inspection Date/Time | Click or tap here to enter text. |

| | |
|---|----------------------------------|
| University of Calgary Representative Conducting Inspection | Click or tap here to enter text. |
|---|----------------------------------|

Instruction: Place ✓ mark on item that is acceptable. Place X mark on items with deficiency and provide details in COMMENTS section. Place NA on item not applicable. Reprint page 2 for additional deficiency details as required.

Note: Safety compliance is not limited to the list of Inspection Criteria. Applicable University Safety Standards, Industry Standards and Legislations will be considered on other safety hazards at the job site.

| Status | Inspection Criteria |
|--------|---|
| ✓ or X | 1. Company Orientation & University (CASP) Safety Orientation completed? |
| ✓ or X | 2. Field Level Hazard Assessment completed? |
| ✓ or X | 3. Field Level Hazard Assessment signed by workers? |
| ✓ or X | 4. Contractor following or meets the requirement of applicable EHS safety program? (e.g. Fall Protection, Powered Mobile Equipment, Confined Space Entry) |
| ✓ or X | 5. Are workers aware of Emergency Response Plan? |
| ✓ or X | 6. Do workers have knowledge of assembly point, muster point and first aid stations? |
| ✓ or X | 7. Worksite perimeter identified? Access to worksite controlled? |
| ✓ or X | 8. Appropriate PPE (Personal Protective Equipment) being used? |
| ✓ or X | 9. Adequate PPE present for work such as face shields for grinding and cutting? |
| ✓ or X | 10. Walkways and stairs are clear of materials & debris? |
| ✓ or X | 11. Protection of the public – Barriers in place? |
| ✓ or X | 12. Fabrication and work areas clean and orderly? |
| ✓ or X | 13. WHMIS Safety data sheets available and chemicals appropriately labelled? |
| ✓ or X | 14. Locates clearly marked? |

| Status | Inspection Criteria |
|--------|--|
| ✓ or X | 15. Fire extinguisher & first aid kit, available and inspected? |
| ✓ or X | 16. Power tools, cords, and plugs in good condition? |
| ✓ or X | 17. Tools and equipment safety guards in place? |
| ✓ or X | 18. Powered Mobile Equipment inspection completed? |
| ✓ or X | 19. Have any required work permits been obtained and posted at all entrances? (e.g. Hot Works, Ground Disturbance, Confined Space) |
| ✓ or X | 20. Appropriate work site signage in place – PPE required? Hazards such as noise, dust, floor openings? |
| ✓ or X | 21. Ladders in good condition, used safely? |
| ✓ or X | 22. Worksite properly illuminated? |
| ✓ or X | 23. Are energy sources, isolated and tagged as per Control Of Hazardous Energy program? |
| ✓ or X | 24. Scaffolding in good condition, with tags/permit? |
| ✓ or X | 25. Laydown or storage area neat and orderly? |
| ✓ or X | 26. Appropriate controls to environmental hazards (spills, runoff, spoil piles, etc)? |
| ✓ or X | 27. Dangerous goods (compressed gases, fuels, etc.) adequately stored? |
| ✓ or X | 28. Adequate access to water/restroom facilities? |

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Contractor Site Safety Inspection

| COMMENTS | | |
|---|----------------------------------|----------------------------------|
| Item Deficiency Details | Responsibility | Completion Date |
| Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. |
| Remarks / Observation: Click or tap here to enter text. | | |

| Representative | Name | Signature | Date |
|--------------------------------------|----------------------------------|----------------------------------|----------------------------------|
| Contractor | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. |
| University of Calgary | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. |
| University of Calgary Manager | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. |



APPENDIX H

Worksite Hazards Associated with University Infrastructure/Setting

| | |
|--------------------------|----------------------------------|
| Project: | Click or tap here to enter text. |
| Project Location: | Click or tap here to enter text. |
| Prime Contractor: | Click or tap here to enter text. |

| Hazard | Exists | May Exist | Does Not Exist | Comments |
|--------------------------------|--------|-----------|----------------|----------------------------------|
| Asbestos | | | | Click or tap here to enter text. |
| Lead Paint | | | | Click or tap here to enter text. |
| PCB's | | | | Click or tap here to enter text. |
| Confined and Restricted Spaces | | | | Click or tap here to enter text. |
| Energized Electrical | | | | Click or tap here to enter text. |
| Buried Services | | | | Click or tap here to enter text. |
| • electrical | | | | Click or tap here to enter text. |
| • natural gas | | | | Click or tap here to enter text. |
| • Water/sewage | | | | Click or tap here to enter text. |
| Vehicle Traffic | | | | Click or tap here to enter text. |
| Hazardous Materials | | | | Click or tap here to enter text. |
| • chemical | | | | Click or tap here to enter text. |
| • biological | | | | Click or tap here to enter text. |
| • radiation | | | | Click or tap here to enter text. |
| Noise | | | | Click or tap here to enter text. |
| Other Hazards | | | | Click or tap here to enter text. |

| | | | |
|---|--|---|--|
| Prepared by: (University of Calgary) | Name Click or tap here to enter text. | Signature Click or tap here to enter text. | Date Click or tap here to enter text. |
| Received by: (Prime Contractor) | Name Click or tap here to enter text. | Signature Click or tap here to enter text. | Date Click or tap here to enter text. |

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In OARS, incidents are classified into levels (1, 2, 3) based on the severity of the incident. Classification also establishes the appropriate level of notification and management involvement.

| OARS Classification | Reportable Criteria |
|---------------------|--|
| Level 1 | <ul style="list-style-type: none"> ● First aid with no lost time (temporary, immediate care) ● Minor incident with no lost time ● Spill or release NOT reportable to Alberta Environment (AENV) or City of Calgary but more than 5L or 5kg ● Near Miss |
| Level 2 | <ul style="list-style-type: none"> ● Medical aid with no lost time (medical care beyond first aid) ● Injury reportable to WCB with NO Lost Time ● Occupational Disease (Illness) reportable to WCB with NO Lost Time ● Radiation incident internally reportable ● Spill or release reportable to Alberta Environment (AENV) or City of Calgary that is not an adverse effect or contravention of an approval, license or code of practice. ● Chemical Spill resulting in injury or exposure ● Motor vehicle accident |
| Level 3 | <ul style="list-style-type: none"> ● Injury reportable to WCB with Lost Time ● Occupational Disease (Illness) reportable to WCB with Lost Time**Injury or accident that results in death ● **Injury or accident that results in a worker being admitted to a hospital for more than 2 days ● **Unplanned or uncontrolled explosion or fire that causes a serious injury or that has the potential of causing serious injury ● **Unplanned or uncontrolled flood that causes a serious injury or that has the potential of causing serious injury ● **The collapse or failure of any component of a building or structure necessary for the structural integrity of the building structure ● **The collapse or upset of a crane, derrick or hoist ● Release of dangerous goods reportable under Transportation of Dangerous Goods (TDG) ● Radioactive incidents reportable to the Canadian Nuclear Safety Commission (CNSC) ● Spill or release reportable to Alberta Environment (AENV) or City of Calgary that is potentially an adverse effect or contravention of an approval, license or code of practice |

DEFINITIONS

- **Near Miss** means any undesired event or incident that under slightly different circumstances could have resulted in personal injury, illness, environmental release, or loss.
- **Environmental Releases** reportable Alberta Environment (AENV) or City of Calgary.
- **Medical Aid** includes medical and other services provided by a person licensed to practice the healing arts in Alberta, and nursing, hospitalization, drugs, dressing, x-ray treatment, special treatment, appliances, apparatuses, transportation and any other matters and things that the Worker's Compensation Board authorizes or provides.
- ****Serious incidents or accidents** reportable to Alberta Occupational Health and Safety as identified in Section 18 of the *Alberta Occupational Health and Safety Act*.

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