AUDIT PLAN FORM

**Audit Objectives**

The primary purpose of performing an Audit will be to assess the effectiveness and efficiency of health and safety measures and their compliance with the legislation and the company health and safety policies and procedures.

**Audit Approach**

Our approach for the execution of this Audit will consist of interviews with key employees, review of documents, inspections and data extractions.

The Audit will consist of the components described below. The phases are listed in sequential order and should provide an overview of the sequencing of the proposed engagement.

**Auditor Contact** **Details**

| Name: | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| --- | --- |
| Position: | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Phone: | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Email: | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

**Role of the Auditor**

The role of the auditor is to obtain current information as it pertains to the successful management of the company health and safety program. The Audit Plan will help the auditor to obtain the best information to present a clear understanding of performance.

**Audit Criteria**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Locations to be Audited**

1.

2.

3.

4.

**Personnel to be interviewed**

Every effort is to be made to interview all levels of employees to include Directors, Managers, Supervisors and Employees.

Directors Employees

Managers JHSC

Supervisors

**Acceptable forms of evidence**

The following is a list of documentation which may be used as evidence for the purpose of this Audit. By no means is the Auditor to be limited by this list.

For each criteria a minimum of one written document source and one other source of evidence is required.

Health and Safety Manual

JHSC recommendation forms

Inspection Reports

Maintenance Checklists

Health and Safety Reports

Training records

Safety Talks records

First Aid, Incident and Accident Reports

ESRTW Reports

**Risk Assessment**

Throughout the course of the Audit, all deficiencies will be ranked as to level of seriousness to the health and safety of the worker. The following Ranking System is to be used:

| Ranking System | | |
| --- | --- | --- |
| A  Major | Immediately dangerous to life and health | High Priority Immediate Action Required |
| B  Moderate | Potential for non-life threatening injury or illness | Medium Priority Action within 3 months |
| C  Minor | Potential for light injury or illness | Low Priority Action within 6 months |

**Timelines**

The Audit process should take no more than two months from conception until implementation of the CIP. Although the timelines are guidelines, every attempt should be made by all parties to facilitate the schedule.

**Audit Schedule**

Audit Plan

Desk Audit

Site Visit

Management Report

Presented to the JHSC

Continuous Improvement Plan (CIP) developed

Commencement of improvement procedure

**Authorization**

This audit plan has been

| Completed By: | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| --- | --- | --- |
|  | Name | Position |
|  | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
|  | Signature | Date |
| Reviewed By: | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
|  | Name | Position |
|  | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
|  | Signature | Date |
| Approved By: | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
|  | Name | Position |
|  | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
|  | Signature | Date |

| **Item** | **Improvement opportunity** | **Action** | **Responsible** | **Target date** | **Status** |
| --- | --- | --- | --- | --- | --- |
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