Getting Started with AuditSoft™ for

Ontario IHSA COR™ 2020 Audit

VERSION 1.0   **May 18, 2023**

AuditSoft

Contents

INTRODUCTION

This document has been made available by the Infrastructure Health and Safety Association (IHSA) and AuditSoft. It is a guide for IHSA internal auditors and associate (external) auditors for the use of AuditSoft to complete an Ontario IHSA COR™ 2020 audit of a registered IHSA organization.

This document should be referenced in conjunction with the COR™ 2020 Handbook that can be downloaded from the IHSA website (https://ihsa.ca)

> As part of the conversion from a Microsoft Excel spreadsheet audit to AuditSoft some audit questions, scoring rules, question guidelines and relationships between questions were changed and/or updated.
>
> IMPORTANT: The AuditSoft implementation covered in this document includes these IHSA approved changes and the audit covered in this document is not identical to the spreadsheet audit that was used in prior years.

Before you begin the COR™ 2020 audit process, here are a few things to consider or verify:

- All workplaces covered under your Workplace Safety & Insurance Board (WSIB) account being considered for COR™ 2020 must be included in the audit.
- **Internal Auditors:** As the permanent full-time employee(s) assigned as Internal Auditor(s) for your organization, you must have completed all pre-requisite training. Ensure IHSA is informed if the internal auditor changes before you start the audit.
- Have you set aside a realistic amount of time to perform the audit? The time required to complete the audit will depend on the number of employees in your organization, the scope of its work and the number of active projects or workplaces.
- Completed the **AuditSoft Application Overview Online training**. For more information on how to register for, and complete, the online training see *Start Your Audit and Complete the Training*.

COR™ 2020 PROCESS

Senior management must ensure that the designated Auditor(s) complete the AuditSoft audit and supporting documents within the timeframes set out in the COR™ 2020 Program Guideline. The COR™ 2020 AuditSoft process consists of the following phases:

1. Install AuditSoft and Get Ready

Get AuditSoft

AuditSoft is a Microsoft Windows based desktop application that must be installed from the AuditSoft website:

1. Open a browser to https://AuditSoft.co/download
2. Click **Download Now**
3. Click on the downloaded file to install AuditSoft.

> ⛔ **Automatic Updates:** Once you have installed AuditSoft it will automatically check for updates whenever it is opened and will automatically update.
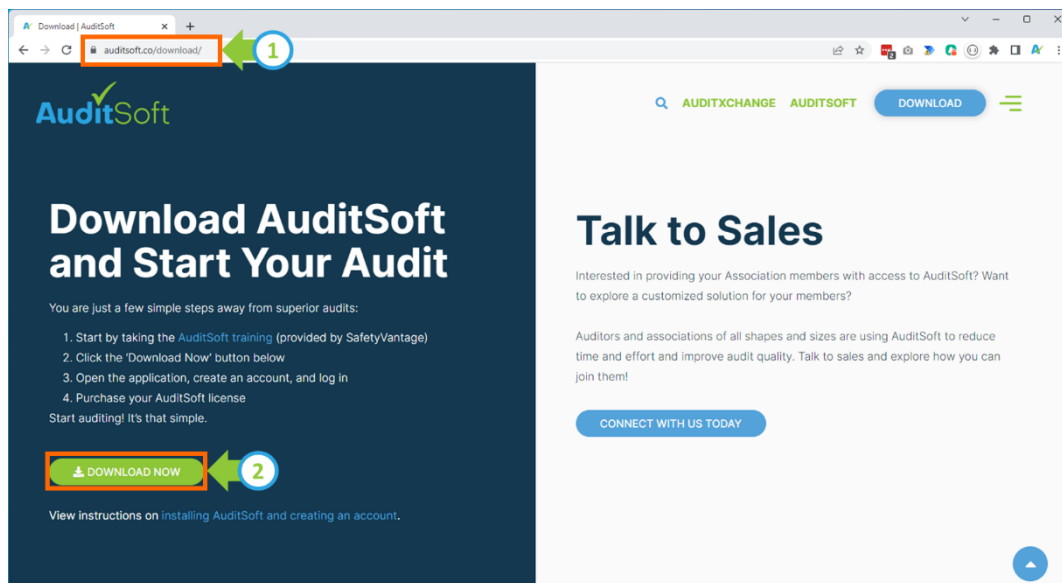
Create an Account

Before you can start using AuditSoft you must first create an account. Your account is used to manage your licenses, backups, etc. To create an account:

1. Open AuditSoft
2. Click **Create an account.**

3. Enter your credentials (Name, email address and password)
4. You will be sent an email to verify your email address and once verified you can log in and start using AuditSoft.
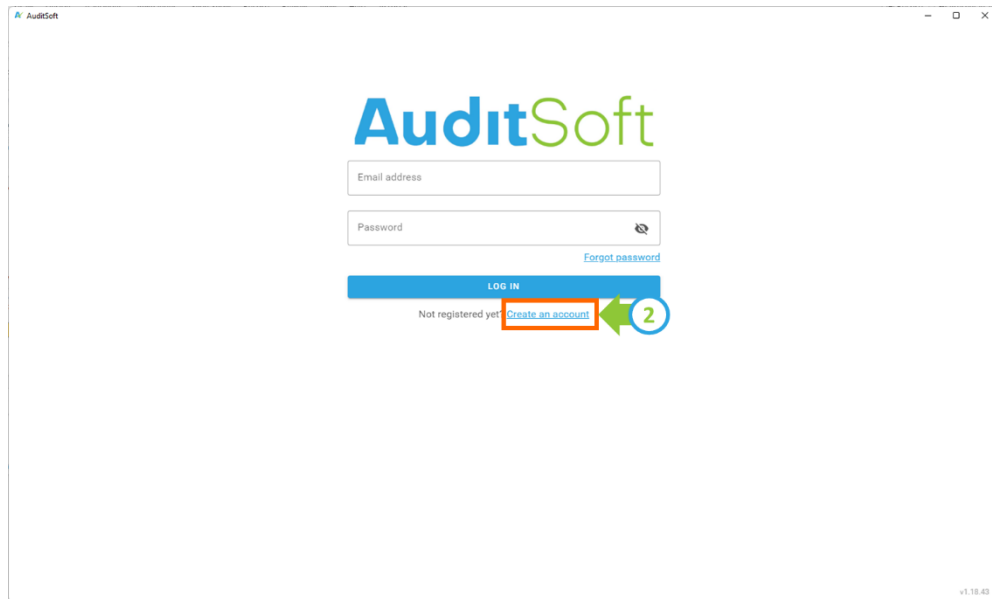
Get a License

A license is required for every audit that is started.

- The licenses must be purchased from within AuditSoft (in-app purchase).
- Each license is issued for the specific **name of the company to be audited**.
- The license is valid for one audit and for 9 months (270 days) from the purchase date. This means that you must complete your audit within 9 months from the day that you obtained a license.

To obtain a license:

1. Click **Get New License**.
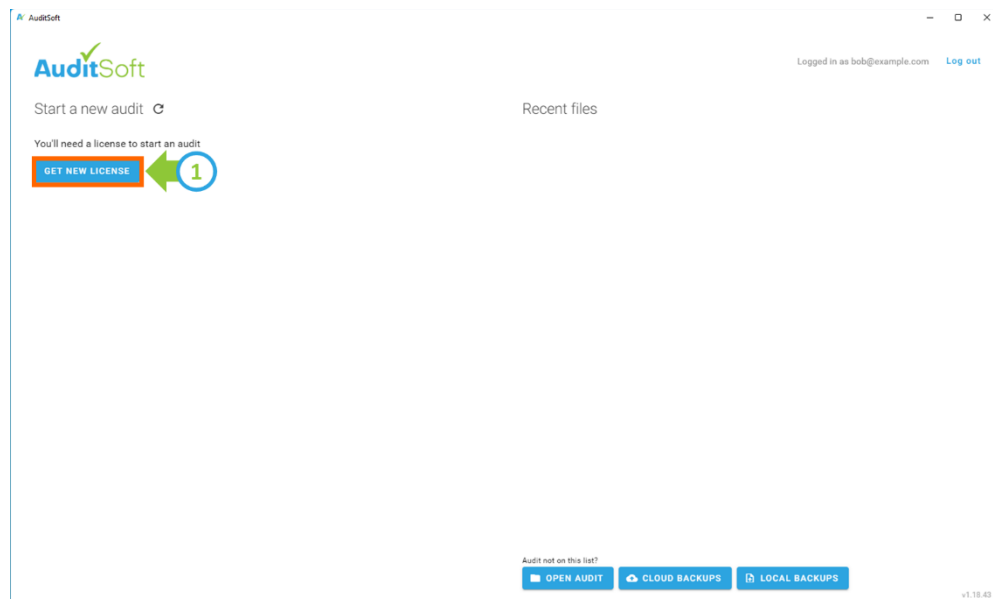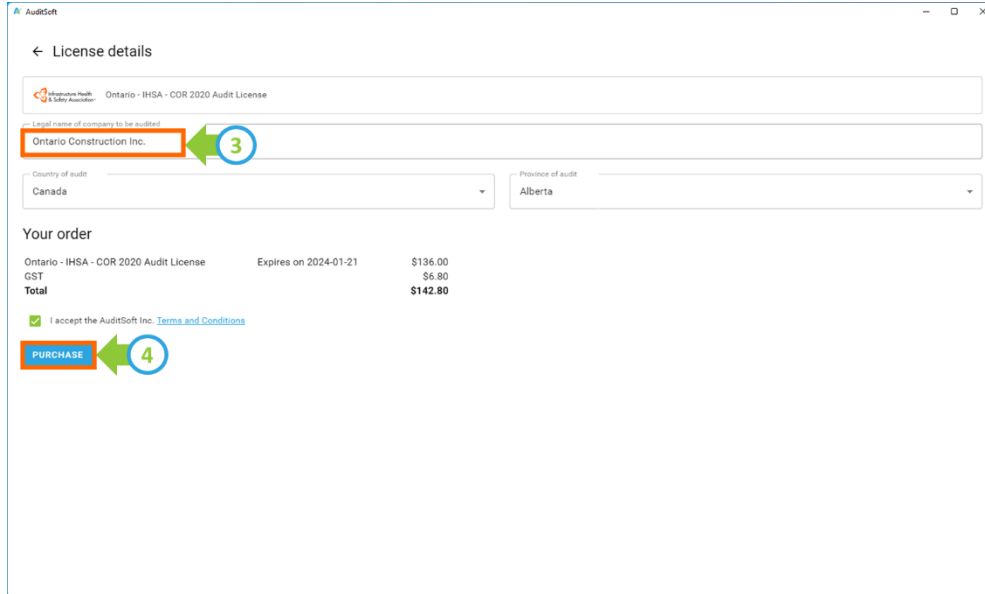
2. Select the **Ontario - IHSA - COR 2020 Audit License** from the list of available audits.

> ⛔ **Note:** There are two other IHSA approved items on this list. The **Ontario - IHSA - COR 2015 Audit License** and the **Ontario - IHSA - COR 2020 Transition** protocol for companies that are transitioning from COR 2015 to COR 2020
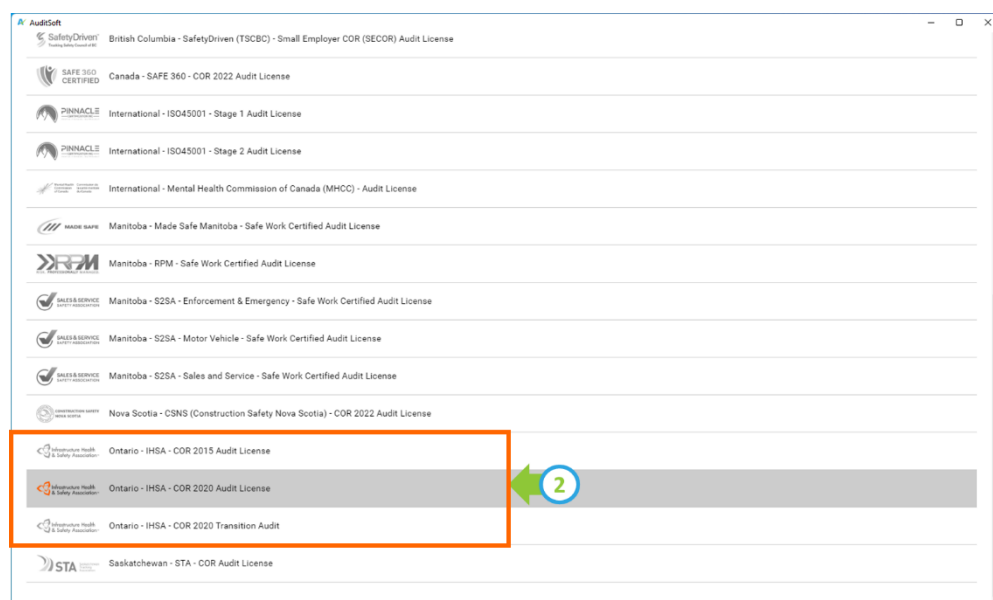
3. Enter the **Legal name of the company to be audited**.

⚠	**Training License:** If you are not ready to start an audit you can request an evaluation license. In the Legal name of company to be audited enter: **"Evaluation"**

4. Click **Purchase** to be taken to a payment portal where you can enter your payment information.

   You will be returned to the AuditSoft **Home** page, and the requested license will be listed on the left side of the page under the **Start a new audit** column.

Start Your Audit and Complete the Training

Once the AuditSoft License has been approved you can:

5. Click on the license name under the **Start a new audit** column.
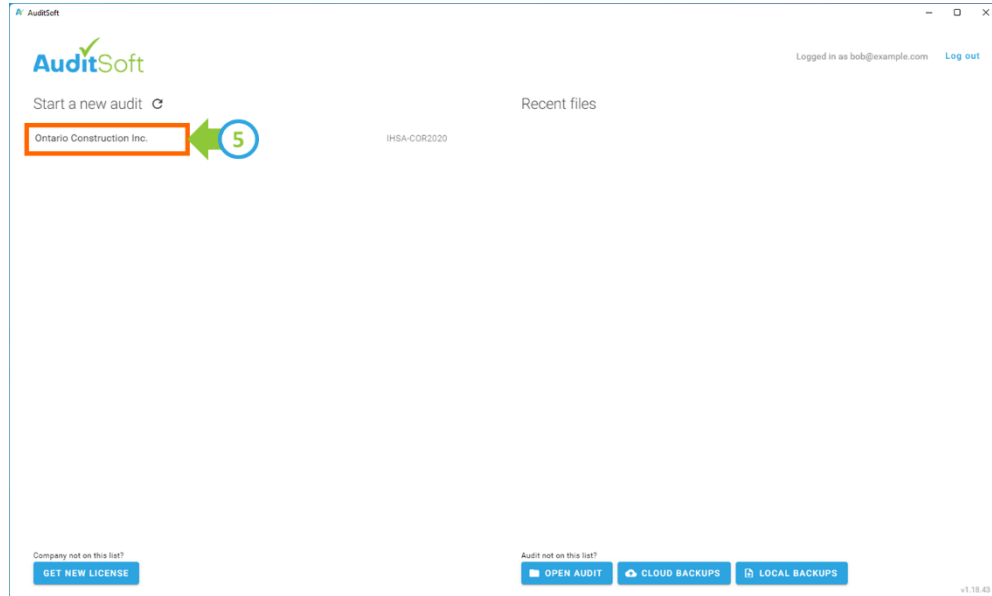
6. This will open a new audit and the audit **Instructions** page will be displayed. Read the instructions.
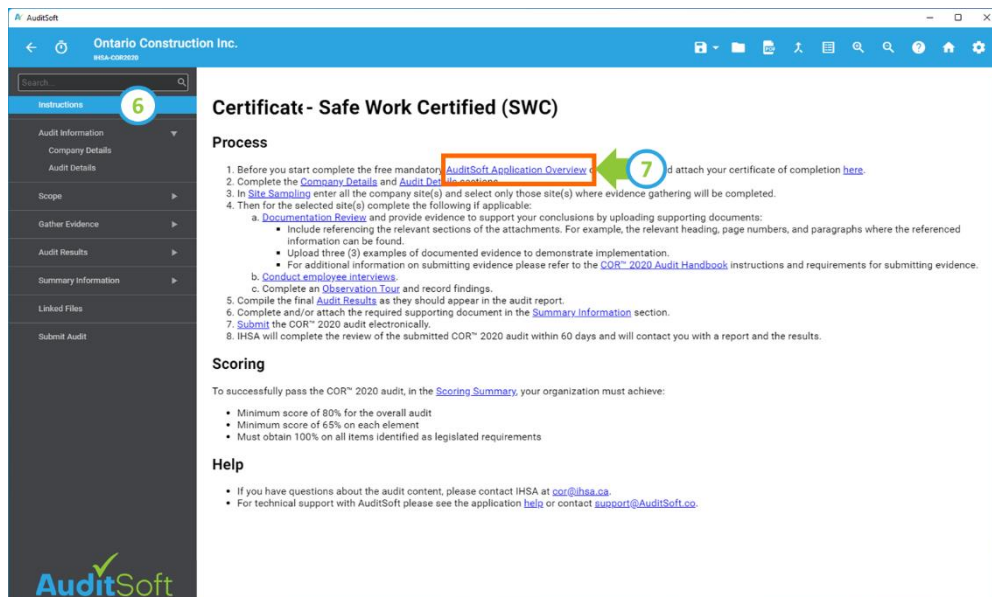
7. Before you proceed click on the training link and complete the **AuditSoft Application Overview online training**.

Online training is mandatory: Please do not proceed unless you have completed the 45-60 min online training course. The rest of this guide assumes you have completed the training and that you are familiar with the AuditSoft workflow and terminology covered in the training.

Note: Remember to download a copy of your certificate of completion. You will need it to submit your audit.

2. Preparing for the Audit

Audit Scope and Structure

The IHSA COR™ 2020 audit consists of 14 elements. Each element has a similar structure with questions covering each of the following:

Policy

A policy is defined as a general commitment, direction or intention and is formally stated by top management. An effective policy statement expresses top management's commitment to the implementation and improvement of its management system.

Each element must have a policy statement that is dated and signed by the owner/CEO. It demonstrates management's commitment to providing the time, budget and resources needed to effectively implement the element.

The policy statement may be a few sentences or longer depending on the element.

Procedure

A procedure is defined as a documented, specified method for completing an activity.

The second question in each element relates to procedure. It specifies all the requirements that must be included in the written procedure. A copy of the written procedure must be attached to your audit as proof for review.

Implementation

Implementation questions seek to identify evidence that the element is in place and working as defined in the procedure. Evidence of implementation can be verified through review of documentation, interviews of managers/workers and/or observations of the workplace. This evidence must demonstrate that the organization is conducting element activities as specified in the procedure for that element.

Document Control

The last question for each element relates to the maintenance of documents and records related to the procedure, where:

- A document is defined as medium containing information related to the Occupational Health and Safety Management System (OHSMS).
- A record is defined as a document stating results achieved or providing evidence of activities performed.

As part of the OHSMS, the organization shall establish, implement, monitor, and maintain procedures to specify which documents and records will be used and maintained.

Documentation

Documentation includes documents and records required by the COR™ 2020 Program and determined by the organization to be necessary for maintaining an effective OHSMS.

The creation, collection, retention and distribution of documents and records must comply with all applicable legal requirements, collective agreements, and organizational policies.

General Audit Information

The audit requires review of documentation, interviews of representatives of management/workers and the observation of work in progress.

The time taken to complete an audit depends on the size and diversity of activities and sites visited during the audit. Allocate enough time during the interview stage to spend approximately 30 minutes per interview. Depending on where the employees are located and their availability, additional time may be needed.

Preparation for the audit includes:

- **Pre-audit preparation**: The auditor, working with senior management representative(s) must create an audit plan. The audit plan should be communicated to the employees, so they know what to expect when the audit is carried out and what their responsibilities are.
- **Opening Meeting:** The organization must hold a pre-audit meeting where the audit plan is discussed. The organization must document meeting minutes. The date of the opening meeting must be recorded and will be required as part of the audit submission.
- **Project/workplace familiarization**: The auditor must be familiarized with the organization and the worksites to be audited through a pre-audit tour of the site(s).

Use the checklist below to help ensure that you have covered all pre-audit steps.

COR™ 2020 Pre-Audit Checklist

1. Inform organization or participants of requirements. Determine:
    a. Name of organization key contact person.
    b. Date, time, and location of the opening meeting.
    c. Date, time, and location of document review (desk audit).
    d. Names and positions of attendees for the pre-audit meeting.
    e. Locations of active worksites for the audit.
    f. Peak activity times.
    g. Organization activities on the day of the audit.
    h. Availability of H&S manual for advance review.
    i. Auditor personal protective equipment (PPE) required.
    j. Speciality PPE and training required.
    k. Additional auditor training (e.g., WHMIS, workplace specific).
    l. Facility for interviews (quiet, comfortable, and convenient).
    m. Availability of records/documentation for review.

n. Workplace/site orientation requirements.
o. Workplace/site escort requirements.
p. Sample size and specifics for interviews.
q. Number of management & workers available for interview.
2. Gather background information and locate:
    a. Written description of organization (website, annual report).
    b. Organizational chart.
    c. Organization health and safety statistics.
    d. Previous audit or action plan (if available).
3. Gather audit tools:
    a. Install and obtain an AuditSoft License.
    b. Complete the **AuditSoft Application Overview** online training.
    c. Current copy of applicable health and safety legislation.
    d. Appropriate PPE (for workplace observation).
    e. Clipboard, pens, highlighters, post-it notes, measuring tape, camera, flashlight, carrying bag/knapsack.
4. Arrange a familiarization tour:
    a. A tour of the workplace/site(s) accompanied by a knowledgeable organization employee to become familiar with the work processes and workplace/site layout before the actual audit.
5. In the Pre-audit meeting address:
    a. Confidentiality and how it will be maintained.
    b. Scope of the audit (# of sites, interviewees, etc.).
    c. Evidence gathering and verification methods (documentation, interview, and observations).
    d. Minimum performance standards.
    e. Procedure for handling and communicating auditor concerns e.g., dangerous situations, illegal activities etc.

If, while completing the internal audit you identify a performance gap in the OHSMS that will result in a failing audit score, *you must act* by creating and implementing a corrective action plan *prior* to completing the audit and submitting it to IHSA for review.
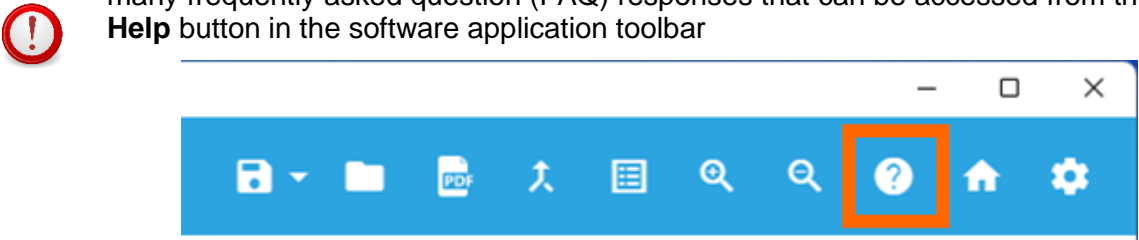
3. Performing the Audit
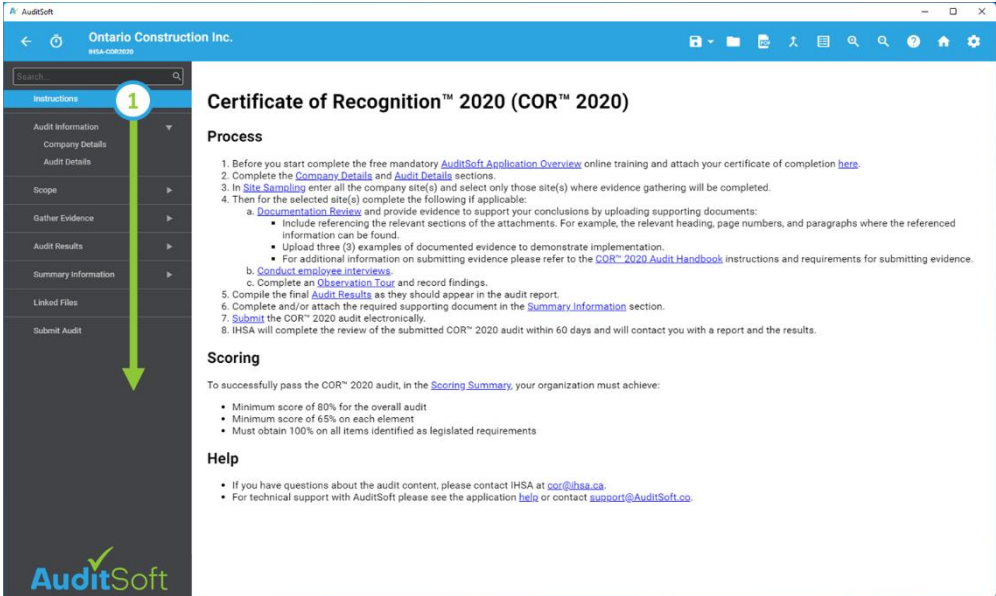
Getting started with AuditSoft

Now that you have completed the **AuditSoft Application Overview Online** training and you have started a new audit we can proceed.

> Please note that the remainder of this guide will only cover those items that are specific to the IHSA and will not repeat the content covered in the **AuditSoft Application Overview** online training.
>
> As reference there is an extensive online manual including explanation videos and many frequently asked question (FAQ) responses that can be accessed from the **Help** button in the software application toolbar

1. The workflow for completing an audit is to start at the instructions in the left navigation menu and to then complete the items systematically from the top to bottom, completing each section in the left navigation menu before moving to the next.
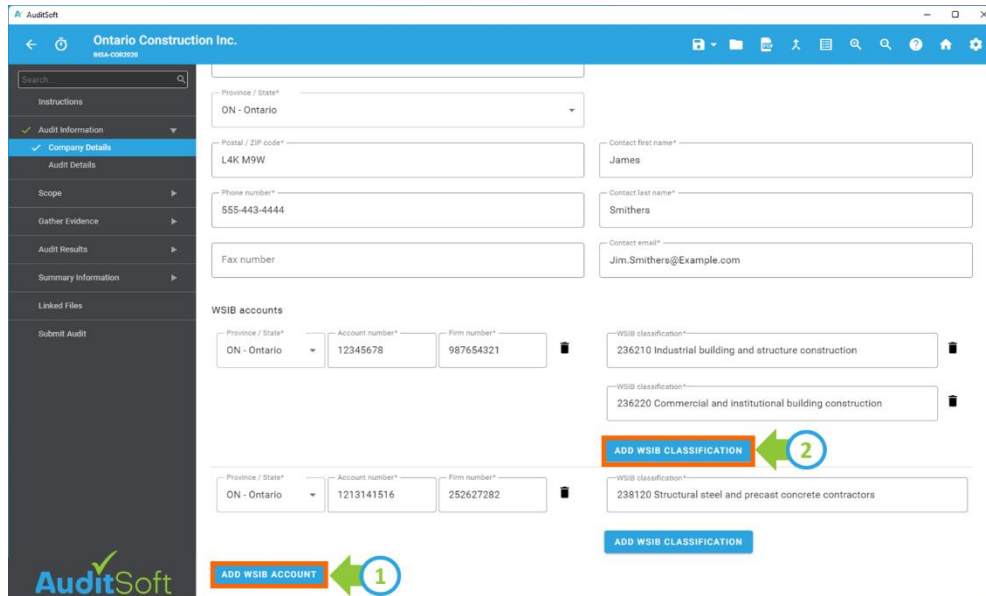

Audit Information

Company Details

This section lists the details of the company or organization that is being audited. Companies often merge or are acquired and AuditSoft supports these changes in business structure:

1. You can add multiple WSIB Account numbers.
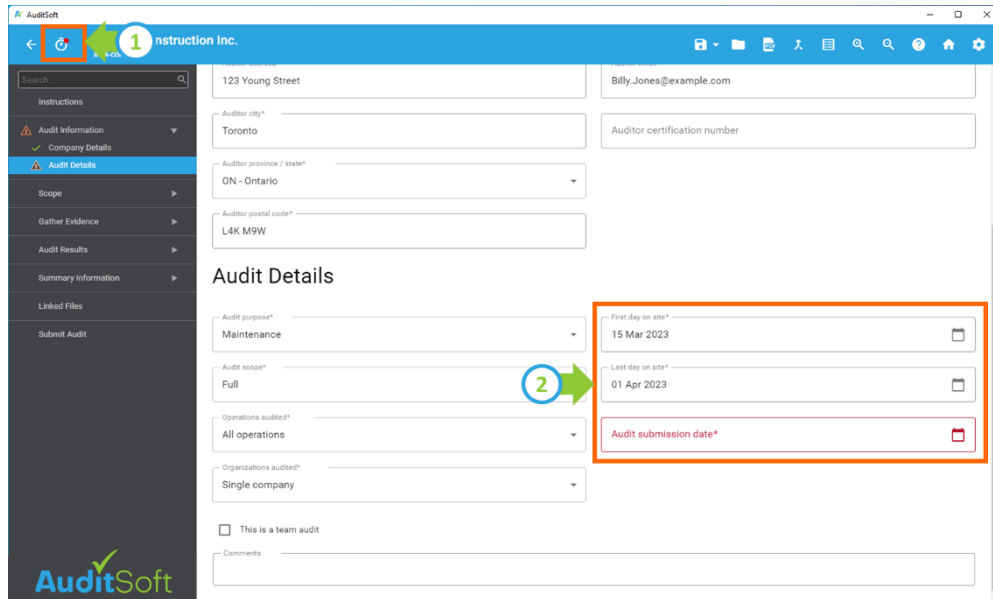2. And multiple WSIB Classification codes can be assigned to each WCB Account number.

Audit Details

An audit is a snapshot that represents the state of a company's OHSMS at a specific point in time. To ensure that the audit is completed in a timely matter, to capture the snapshot, guidance is provided to auditors. Guidance on the recommended amount of time that the audit should take is based on best practices and it is NOT a rule.

- The recommended amount of time from the **first day on site** until the **last day on site** represents the evidence gathering phase of the audit and the allotted duration for this phase is: **45 days**.
- The amount of time allotted for completing the audit report after the **last day on site** until the audit is submitted is: **21 days**.

To remind the auditor of this guidance:

1. There is a reminder **clock** icon in the upper left corner of the application.
2. The available time on the clock is determined by the dates in the **Audit Details** section.
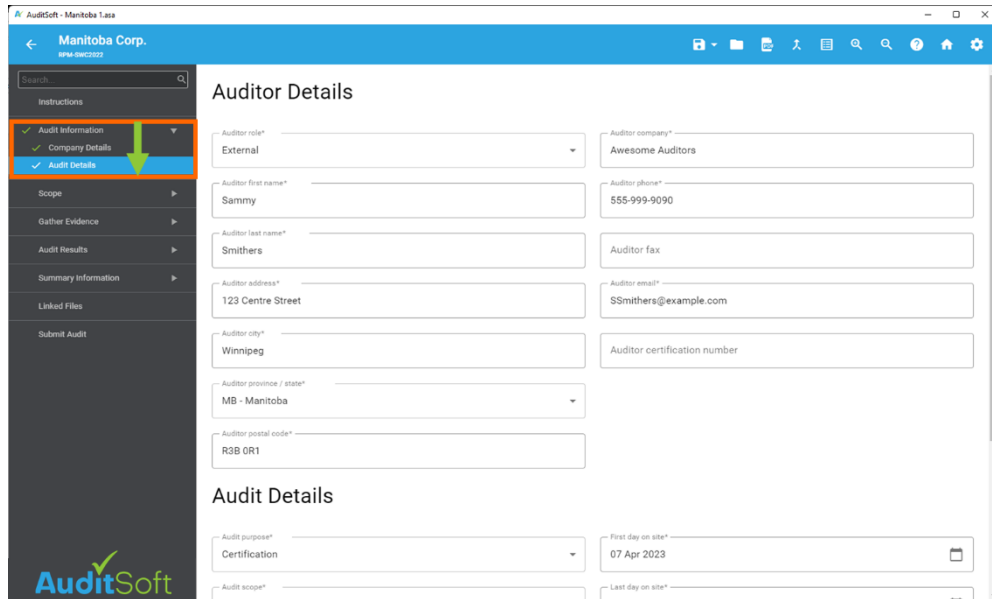
The time frames of the clock in AuditSoft are there to guide the auditor with the intent of closing the audit snapshot in a recommended time frame. IHSA is the final authority on the amount of time that can be taken to complete your audit and your IHSA Lead Auditor may allow you to exceed the suggested time frames.

Important: Internal maintenance audits must be submitted 60 days prior to the anniversary date.

Important: Exceeding the recommended allotted time does NOT affect your ability to submit your audit.

After the **Audit Information** section has been completed, with a green check mark next to each subsection, it is time to move to the next section of the audit.

Scope

Site Sampling

An important part of audit planning is determining which site(s) to visit, how many interviews to do, and the number of observation tours to complete.
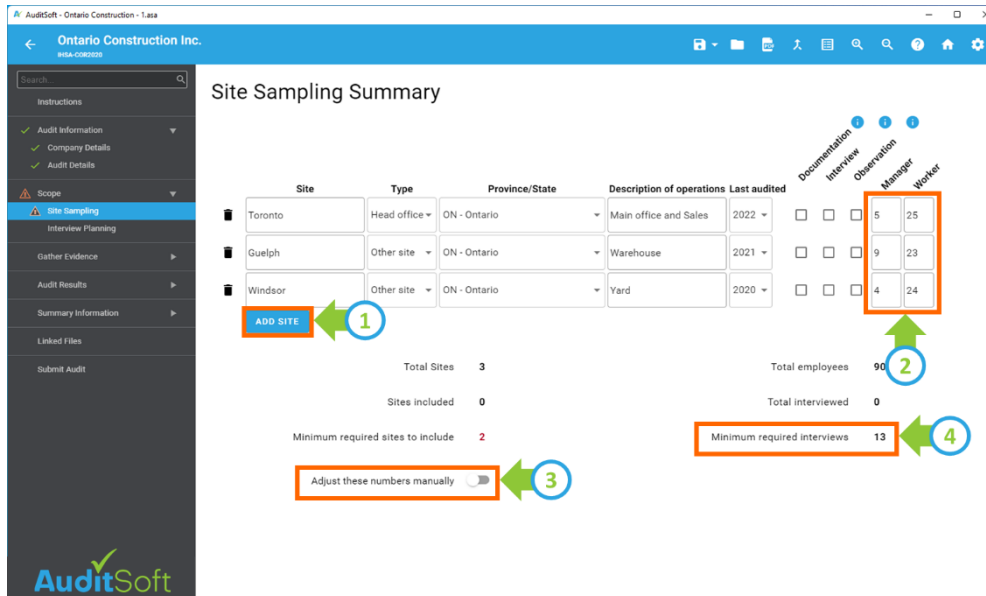
The worksites included in the audit must be representative of the overall organization operations. To determine the number of worksites to visit the IHSA Worksite Observations Guidelines table has been incorporated and AuditSoft automatically calculates the number of sites to include based on the active sites entered. In addition to these active sites the head office / main office / shop visit must be included in the scope of the audit.

> ⛔ The head office / main office / shop must be included in the scope of the audit.

When updating this **Site Sampling Summary** page:

1. Select **Add site** to add every active site and the **head office** for the company.
2. For each site enter the number of employees in each role that work at the site.

> ⛔ It is important to enter all the sites and all the employees at each site.
>
> If you have many sites (typically over 30) you can select **Adjust these numbers manually** to enter a custom site visit and interview plan (see item 3). This plan should be approved by IHSA (cor@ihsa.ca) before you start the audit.

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4. After the number of employees has been entered, the minimum number of interviews is calculated based on the IHSA Audit Interview Ratio Table that has been incorporated within AuditSoft. The auditor may determine that additional interviews are required based on the organization size and diversity of work – see **Interview Planning** below.

Next select which sites will be included in the audit. To be included means that you will perform at least one evidence gathering activity at the site. There are 3 evidence gathering methods:

D   - **D**ocumentation review.

I   - conducting employee **I**nterviews.

O   - completing and **O**bservation tour.

5. Always include the head office in the audit. In most cases you will want to complete all 3 evidence gathering steps (DIO) at the head office.
6. At other site(s) you may or may not include a documentation review (more about this in the Review Documentation section), interviews and/or observations based on the setup of the audits and whether you will physically or virtually visit the site.

Interview Planning

Interview planning ensures that you select a representative sample of employees to interview. If the auditor determines that additional interviews are required based on organization size and diversity of work the planned number of interviews can be adjusted:

1. Selecting the **Use Custom Interview Plan** option.
2. Enter the approved number of interviews that need to be completed at each site.

> ⚠️ Any adjustment to the calculated interview ratio requires prior approval from IHSA and must be approved by IHSA (cor@ihsa.ca) before you start the audit.

After the Scope section has been completed, with a green check mark next to each subsection, it is time to move to the next section of the audit.

Gather Evidence

When gathering evidence, it is standard audit practice to visit one site at a time. At each visited site you may decide to complete any, or all, of the following evidence gathering steps:

1. Review documentation (D) to ensure that policies and procedures are in place,
2. Interview (I) employees to verify that they are aware of the policies and procedures,
3. and finally complete an observation (O) tour to confirm that policies and procedures are being adhered to.

With the use of technology and specifically online document repositories (Dropbox, SharePoint, etc.) and video conferencing tools (Zoom, Teams, etc.) some of the documentation review and interview tasks can often be completed remotely or from a single location.

Review Documentation

When you start an audit, it is a best practice to start with a documentation review at the **head office**. Depending on the documentation available at the head office you may not have to review documentation at other sites. During the documentation review there are generally two types of documents that are encountered:

- **Directive Documents** – these include element specific policies and procedures that apply to the entire company. Because they are companywide documents, they only need to be reviewed at the head office. They are the same at every other site and can therefore be omitted and do not have to be reviewed again when visiting other sites.
- **Operational Documents** – these on the other hand, are site specific and include pre-job hazard assessments, inspections, emergency response plans and site-specific job descriptions that are specific to each site, if these documents cannot be accessed and reviewed at the head office, they should be reviewed at every other site included in the audit.

The document review involves:

- Assessing the content and completeness of the organization's health and safety manual and any records and/or forms pertaining to health and safety.
- Reviewing documented evidence of organization/work specific practices and procedures.
- Examining records and forms for completeness for example: checking for dates, frequency, agenda items, signatures, and attendance.
- **For internal audits** - Be sure to refer to the question **Guidelines** for specifics, but in general:
  - Internal auditors are required to attach **three (3)** consecutive samples of evidence to the audit (See Example 2 below).
  - Internal auditors are required to highlight and **cross reference** the specific verifying information in the health and safety program manual and on the records and forms that are being attached to the audit. In the document add reference to the element and question number that the document pertains to (Examples 1 and 2 below).

Example 1:

SAMPLE Construction Company Inc. Health and Safety Manual	Issue Date: January 2002	Section 9 Page 1
Workplace Inspections *(Item 9.2)*	Revised: January 2012	Reviewed by: M. Truwe CEO

Purpose

Inspecting the workplace to ensure that the appropriate controls are in agreement of the company health and safety program. Inspections can help identify problems and assess risks before accidents or injuries occur.

1. **Supervisors and health & safety reps will conduct documented workplace inspections.** *(Item 9.2 (d))*
2. The inspections will cover all company premises and job sites.
3. The INS Form is to be used as a guideline since specific sites may have unique situations and potential hazards that may not be covered by this list.
4. **Planned inspections will occur weekly on project sites and monthly at the company premises.** *(Item 9.2 (d))*
5. Review previous inspection records and note any commonly reported hazards.
6. Use your eyes, ears and other senses to identify actual or potential problems as you go about your inspection.
7. **Record the hazards on the INS Form.** *(Item 9.2 (h))*
8. When unsafe conditions require immediate action, correct the situation.
9. A copy of the inspection form will be kept on the project.

Example 2:

Site/Contractor Name:	SAMPLE Construction	Date:	25/05/20
Site/Contractor Name:	SAMPLE Construction	Date:	27/04/20

Ref. Item 9.3

Site/Contractor Name:	SAMPLE Construction	Date:	25/05/20
Location:		**No. of Workers**	53
Conducted By:			

S – Satisfactory		*NS - Not Satisfactory*		*NA - Not Applicable*

Item Inspected	S	NS	N/A	Immediate Action
1. Site Access				
Clean, level around				
Adequate ramps				
Adequate stairs				
Adequate ladders				
Other				
2. Housekeeping				
Clear walkways				

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Additional documents required for verification may include but are not limited to:

- Organizational chart.
- Health and Safety policy statement.
- Orientation records and individual training records for all employees [as required].
- Hazard assessment.
- Organization rules, safe work practices and safe job procedures (controls).
- Equipment/tool maintenance log and inspection checklists.
- Incident reports.
- Health and safety statistical reports.
- Completed workplace inspection reports (including completed corrective action plans).
- Emergency response plans.

To start the documentation review at the head office:

1. In the **Gather Evidence** section of the left navigation menu select **Review Documentation** and then select **Add/Edit** next to the head office site name.
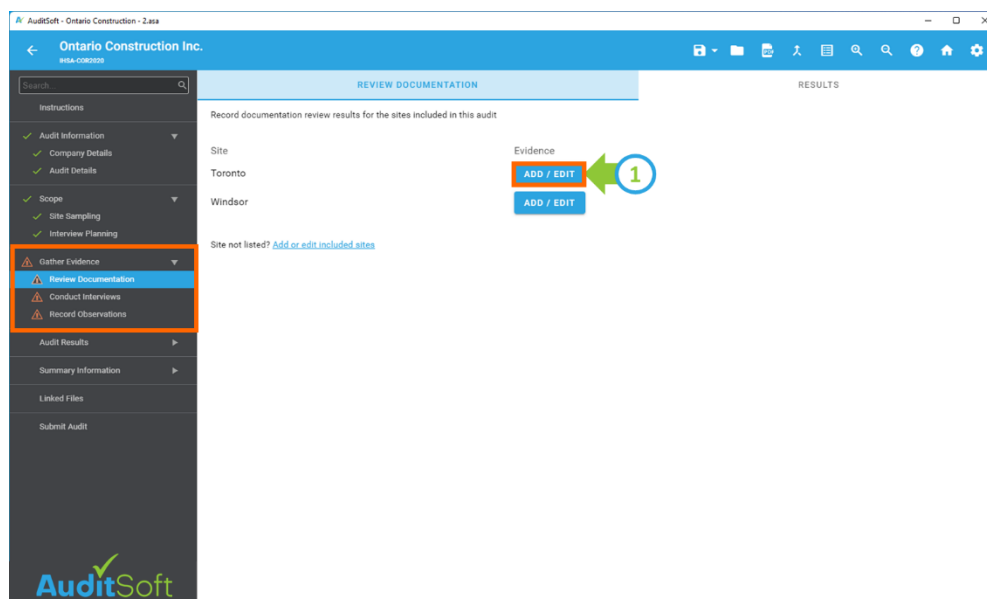
All documentation review questions should be answered at the Head office.
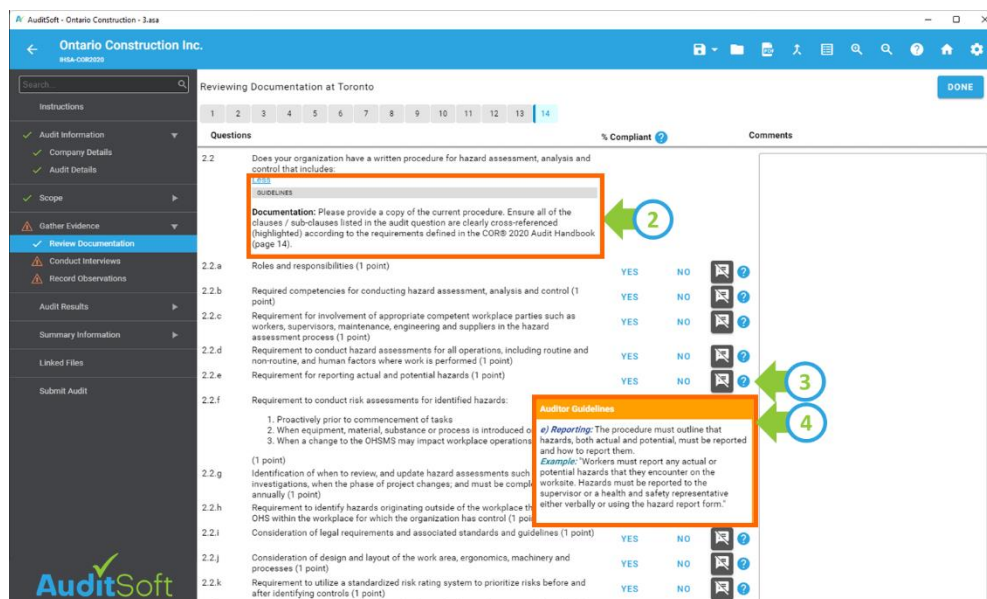
The only questions that do not need to be answered are those optional questions that may not be applicable and that can be marked as **Question is not applicable to this audit**.

> ⚠ Questions that are marked as "**Question is not applicable to this audit"** will not be scored and will not be included in the overall audit pass/fail calculations.

On the documentation review page all the questions that must be verified by documentation review are listed. There is additional information on this page to provide guidance on what the auditor should be looking for.

2. Click on the **More / Less** link under each question to expand or collapse the question guidelines.
3. There is an information icon (a **question mark**) next to many questions.
4. Clicking on the icon opens an **Auditor Guidelines** pop-up that provides further guidance on how and what to look for when responding to the question.

> **Important:** The following is a fundamental difference between AuditSoft and the spreadsheet audit:
>
> When recording your response to the documentation review question, you are not scoring the question. You are **recording the % Compliant** to the audit requirement and the assigned % will be used in a later step (**Audit Results**) to automatically score each question based on IHSA scoring rules.

5. **Internal auditors** are required to provide proof. In your supporting documents you **must first highlight** the appropriate sections of the document that pertain to a question **BEFORE** you click **Add Attachment**. Attach no more than three (3) consecutive samples of evidence to the audit. When attaching documents ensure that you also specify the page and/or paragraph of the attached document that relates to the question in addition to highlighting the section before attaching the document.

> Attachments are provided as proof. The intent is for the IHSA audit reviewer to find the information quickly and easily within the attachment.
>
> For this reason, referenced section in each document **must be highlighted** and no more than three (3) consecutive samples of evidence should be attached per question as outlined in the **Guidelines** of each question.

When recording the response to a documentation question there are 2 different response formats. The type of response required for each question is defined by IHSA. They are:

6. **Yes (100%) or No (0%)** – where "yes" means that the documentation reviewed is 100% compliant with the audit expectations.
7. **Evidence Sampling** – In this instance the auditor looks at a sample of data and then records the number of items in the sample that met the audit requirements. This is then used to calculate the **% Compliant**. For example:
    a. If the auditor is looking at 12 inspection reports, and find that 11 of the reports have a corrective action plan then 11/12 = 92% are compliant, or
    b. If the auditor is looking for 3 requirements within a document and only 2 are present, then the document is 2/3 = 67% compliant.
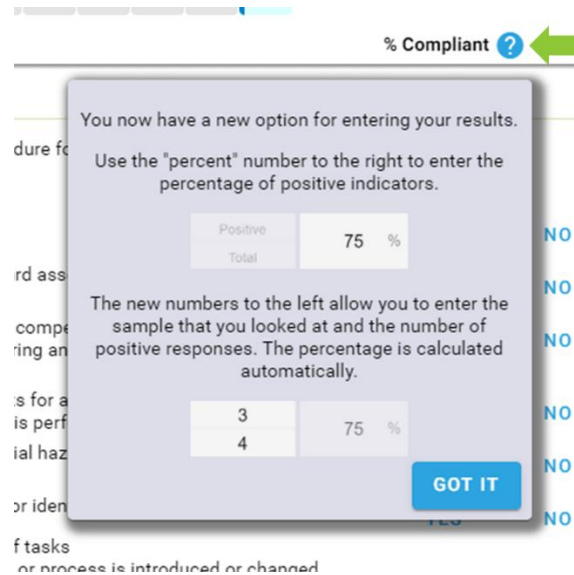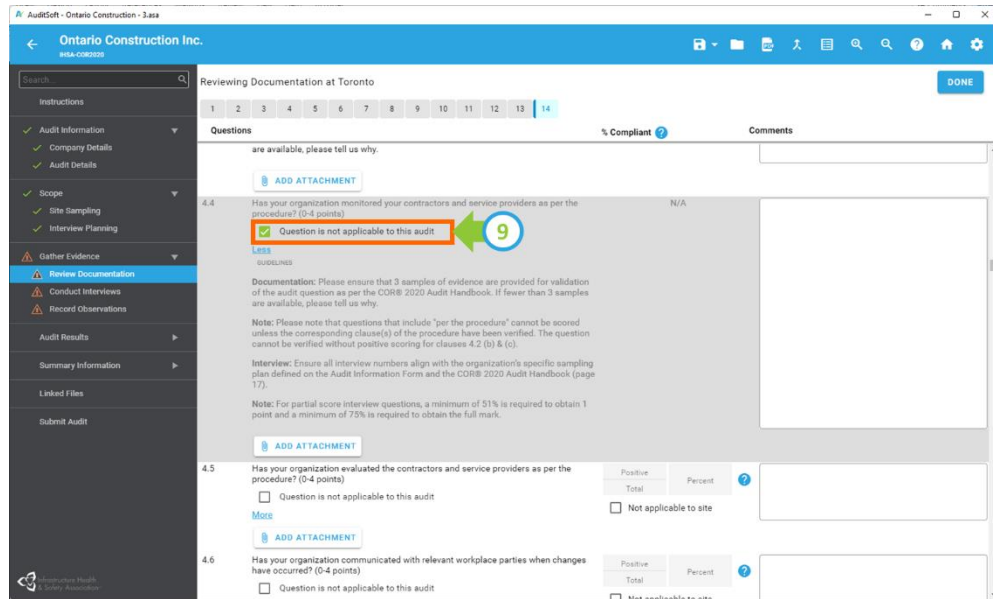
8. **Legislated** questions are indicated with red text in the questions guidelines. Achieving 100% compliance on every legislated is required to pass the audit.
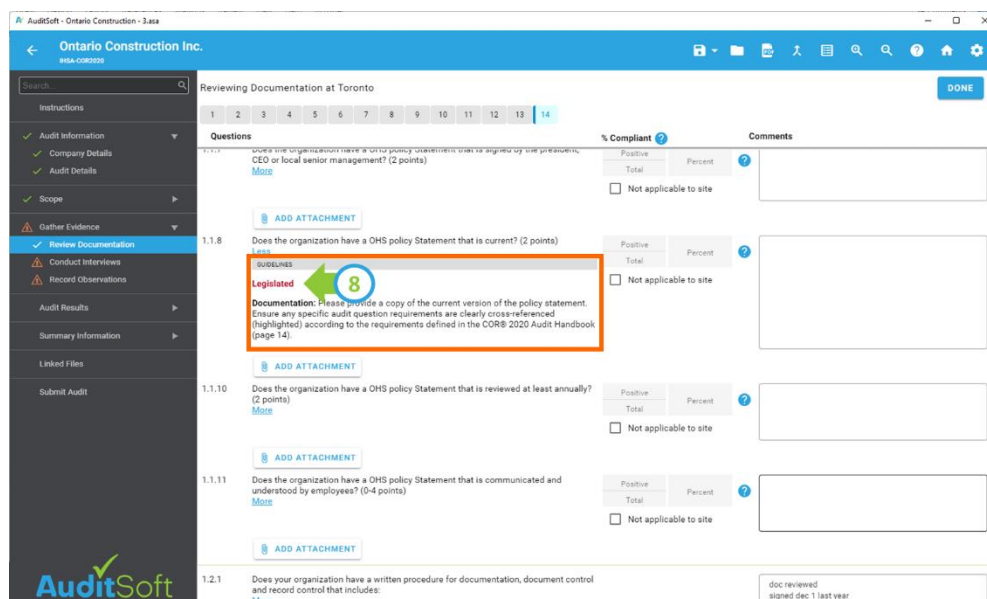
If you are not 100% compliant with all the legislated requirements, you will need to take corrective action and become 100% compliant before you can send in the audit for assessment.

If a gap was identified during the audit, please acknowledge that this performance gap existed and has been corrected within your auditor notes. This should also be documented on your corrective action plan submitted as part of the audit.

> **NOTE:** There are a few questions in the audit that may not apply to your organization. If the question does not apply select **Question is not applicable to this audit** to have the question removed (see 9 above).
>
> If a question is marked as **Question is not applicable to this audit**, you must add a note in **Findings and notes** to justifying the reason for marking it as not applicable.
>
> Examples of questions that can be marked as N/A are: 4.3, 4.6,10.6, 10.7 and 14.2.3.

Reviewing documents at Other Site(s)

At the start of the Review Documentation section the differences between directive and operational documents were discussed. If all the operational documents required for the audit were not available at the head office for review, it may be necessary to review only those operational documents that were not available as part of a documentation review at other site(s).

1. Start the documentation review at the next site.
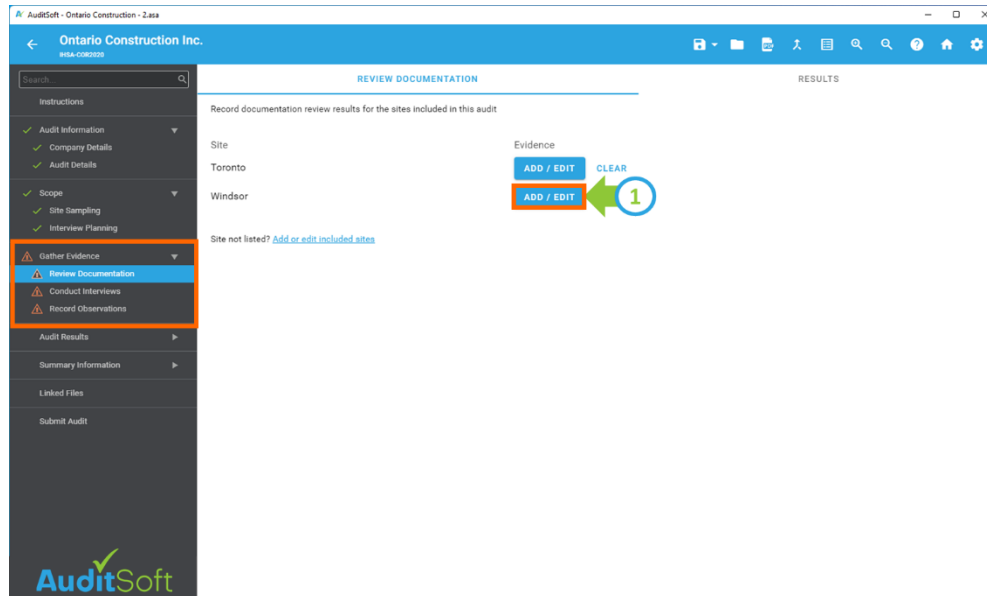
2. At the site questions related to directive documents, that have already been reviewed at the head office, can be ignored and can either be:
   a. marked as **Not applicable to site,** or
   b. can be left blank.
3. Questions related to operational documents that are specific to the site, and that could not be reviewed at the head office, like site specific emergency response plans should be answered.
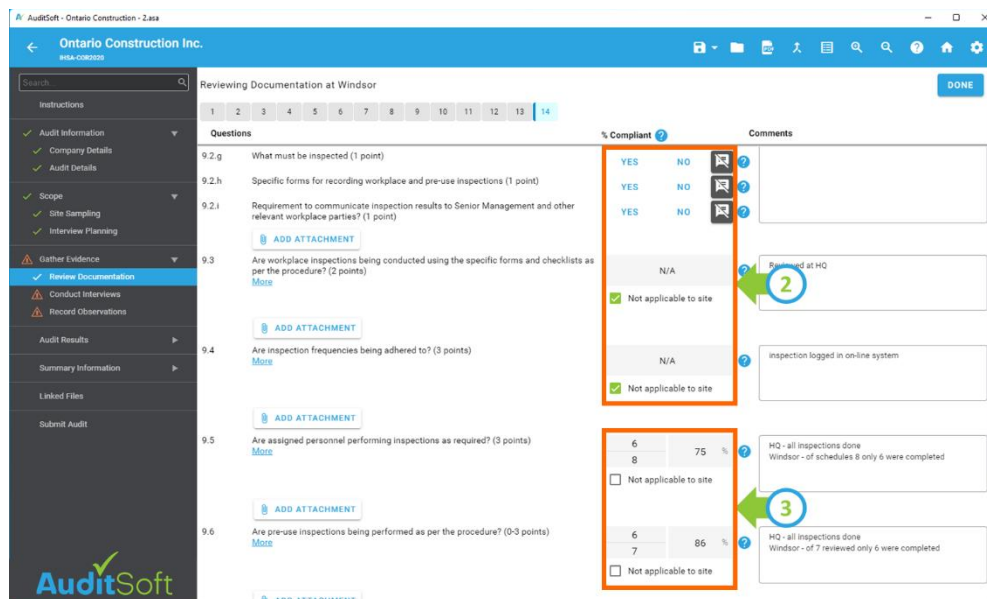
The decision as to whether operational documentation should be reviewed only at the head office or also at other sites will be determined by the availability of documents and is ultimately a decision that each auditor must make on a case-by-case basis.

> Averaging the Documentation **% Compliant** over multiple sites is calculated based on a **<u>Mathematical average</u>**. For example: if a question related to an operational document review results in you assigning 100% Compliant at the head office and 80% Compliant at another site the averaged **Result** that will be used for scoring will be (100% + 80%) / 2 = 90%

Conduct Interviews

After confirming the existence of the required documentation, the next step is to verify how well the health and safety system is communicated to employees. This is accomplished by interviews to determine if employees were included in the development of the program and to gauge their understanding of the OHSMS, procedures and policies.

Representatives of both management and workers will be interviewed to verify specific audit questions. The auditor will determine whether the interviewee provides a **positive** or **negative** response. If an interviewee is unwilling to provide a response to an interview question it can be marked as **no comment**, which is treated as a negative response.

Some items to keep in mind during Interview Planning and when selecting employees to interview:

- Use the organizational chart to select a cross section of employees (management and workers) to interview.
- Senior management should ensure interviewees are available and understand the purpose of the audit interview.
- It is both an industry best practice and IHSA requirement to interview employees one-on-one in a private setting where they can speak openly. Group interviews are not permitted.
- AuditSoft presents IHSA approved interview questions based on the position (management or worker) of the interviewee. Ask the questions as they are presented. If it is necessary to paraphrase or probe further, do not change the intent of the question.
- The auditor is required to ask each interviewee all questions that apply to their position.
- Do not provide the answers or lead the interviewee to the answers.
- If there are language barriers the organization being audited must provide a professional translator to support interviews.

Start an Interview
In AuditSoft navigate to **Conduct Interviews** within the **Gather Evidence** section on the left navigation menu:

1. Select the position of the person that you are interviewing at the site where they work.

2. Then select **Start**.
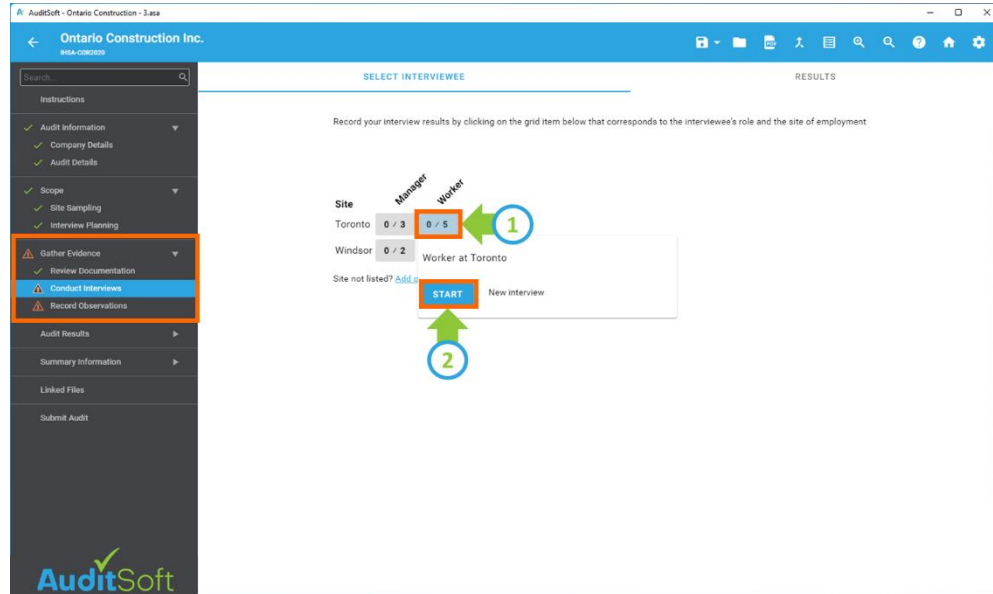
The Interview page will open and list only those questions that are applicable to the position of the interviewee that was selected.
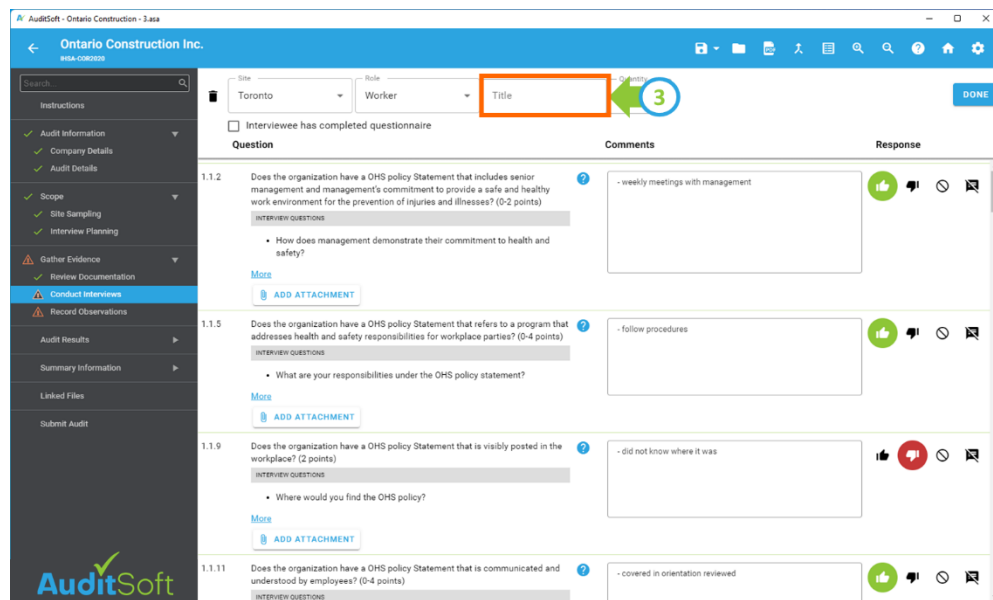
3. When recording interviewee responses, it is a good practice to record the interviewee's title so that you can easily return to a specific completed interviewee's responses later.

> Interview responses are stored in the AuditSoft audit file (.asa), but to ensure auditor-interviewee confidentiality individual interview responses are not reported in the PDF audit report. IHSA promotes anonymity for interviewees and for this reason responses are aggregated and converted into a % which is included in the report and used to score the audit.
>
> **Important:** Care should always be taken to ensure that specific employee responses cannot be deduced from written findings in the **Audit Results** section of the audit.

Record Observations

The final evidence gathering step is to complete a tour of the site(s) that were visited and to record observations. The purpose of conducting observations is to verify the information gathered during the documentation review and the interviews, and to get a sense of the overall level of compliance with the standards and company policies and procedures.

Specifically, the auditor is visually confirming whether the workers are following procedures and/or whether the workplace/site conforms to the legal and organization OHSMS requirements.
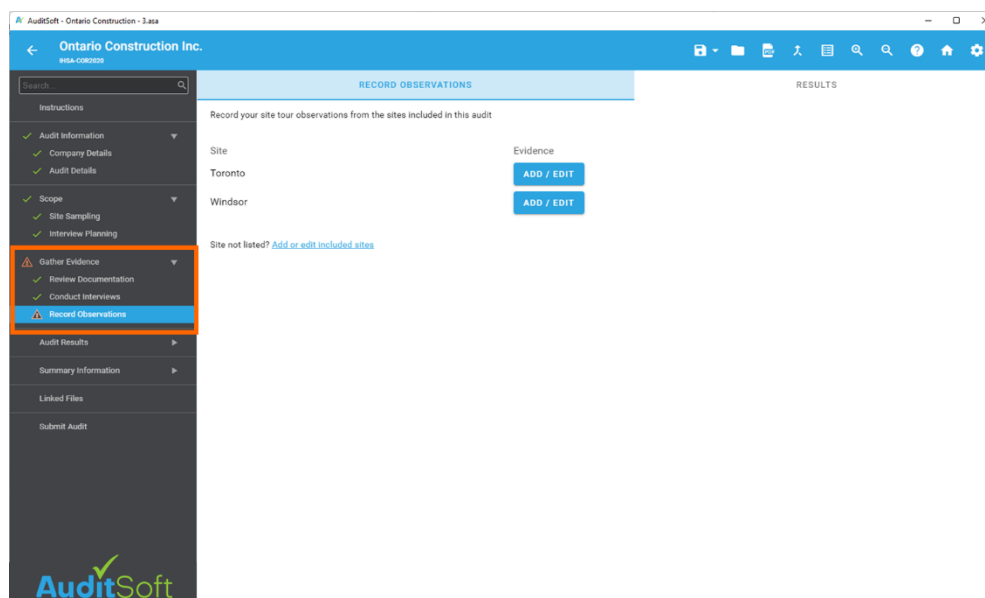
Record an Observation Tour

In AuditSoft navigate to **Record Observations** within **Gather Evidence** section on the left navigation menu and enter your detailed observation notes for each site toured.

> Averaging the Observation **% Compliant** over multiple sites is calculated based on a **Mathematical average**. For example: if based on your observation you assign 85% Compliant at the head office and 65% Compliant at another site the averaged **Result** that will be used for scoring will be (85% + 65%) / 2 = 75%

The evidence gathering steps represent the bulk of work in any audit and after completion the **Gather Evidence** section in the navigation menu will be marked with a green check mark next to each subsection. It is now time to move to the next section of the audit.
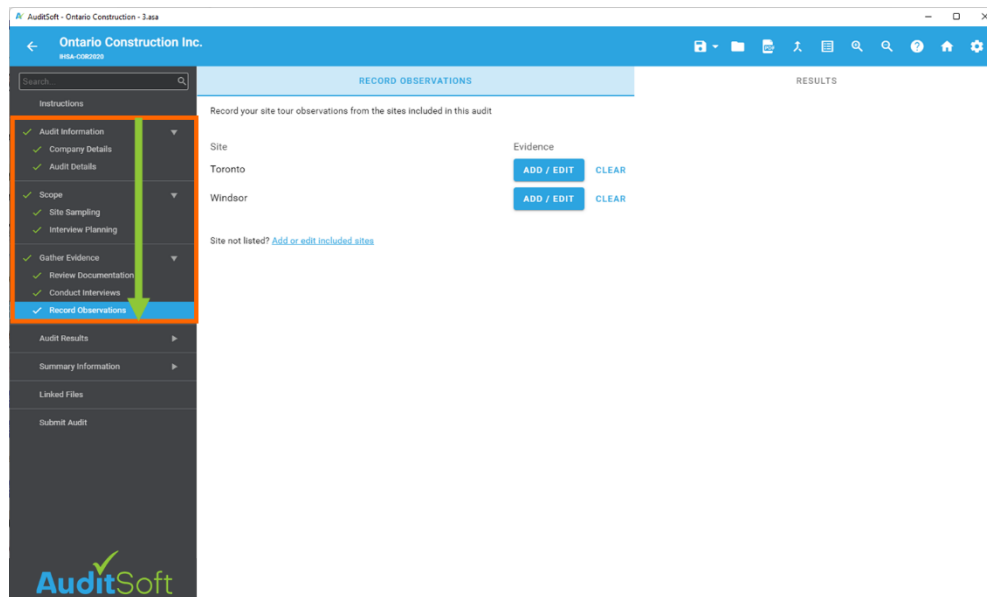
Audit Results / Audit Summary Report

The **Audit Result** section is where we draft the final audit responses as they will appear in the report. Any notes that were recorded during the **Evidence Gathering** steps can be accessed and referenced to formulate the final audit response for each question.
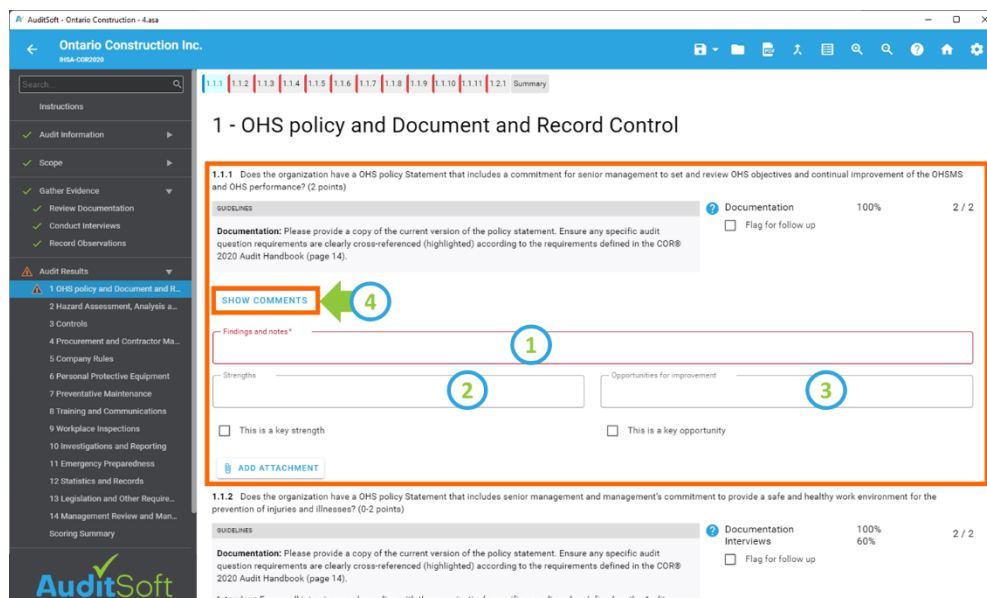
The findings and auditor notes presented in this section must be detailed enough for the organization to address gaps identified in their OHSMS.

Audit Results contains 14 elements and three sub-elements, and each has several questions. When answering each question, it is important to keep the content separate and to not duplicate content. In general, there are three (3) text areas per question for recording:

1. Findings and notes are **required** for all questions.
2. Strengths are optional.
3. Corrective actions/Opportunities for improvement: **Corrective action** is **required** if you do not achieve all the available points for a question, else you can optionally define an Opportunity for improvement.

> When composing the final audit responses for a question click on **Show Comments** (4) to view and/or copy your **Evidence Gathering** notes associated with the question. Remember that you are now compiling the final response and you should rewrite your notes as full sentences for the final report.

In the **Findings and notes** section include:

- Reference to where supporting evidence is found (document page number or document title).
- Brief explanation of what documents are being provided.
- Reference to support material (forms, minutes) that are used for verification.

- Detailed notes about what was observed by the auditor.
- Detailed descriptions of what the photograph demonstrates if it is used to validate observations.
- Reason for assigning the **% Compliant** or **Question is not applicable to this audit**.
- Any other comments or reminders which may assist the audit reviewer.

> **IMPORTANT:** The IHSA review of the audit will only consider the auditor's written responses and evidence that is presented for each question in the **Audit Results** section. Attached supporting documentation must be accurately cross referenced to the audit question it is validating.

Scoring

Every audit question is verified during the **Evidence Gathering** process by appropriate documentation, interview and/or observations and assigning a **% Compliant** for each verification method used.

The **% Compliant** assigned to each question is automatically converted into question scores through one of 12 IHSA scoring rules.

> The twelve **IHSA Scoring Rules** are defined in the SCORING section of this guide.

> **NOTE:** Not all audit questions may apply to an organization's operations. There are a few questions in the audit that may not apply to your organization. If the question does not apply select **Question is not applicable to this audit** to have the question removed.
>
> If a question is marked as **Question is not applicable to this audit**, you must still add a note in **Findings and notes** to justifying the reason for marking it as not applicable.
>
> Examples of questions that can be marked as N/A are: 4.3, 4.6,10.6, 10.7 and 14.2.3.

Minimum Scores for passing an IHSA COR™ 2020 audit are:

- Minimum score of 80% for the overall audit.
- Minimum score of 65% on each element of the 14 elements and 3 sub-elements.
- Must obtain 100% on all items identified as legislated requirements.
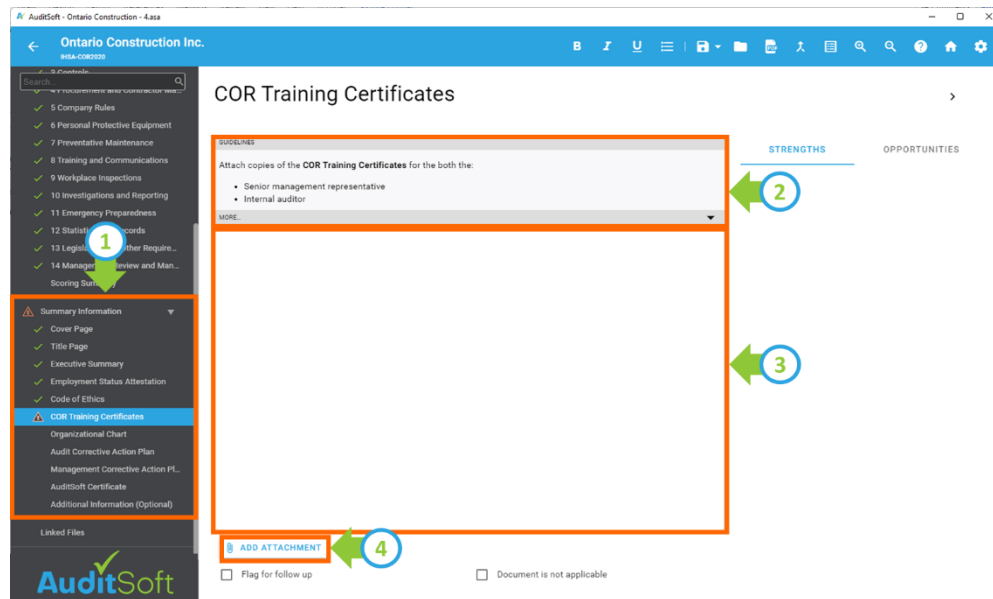
After answering every question in the **Audit Results** section, it will be marked with a green check mark next to each element and sub element. It is now time to move to the next section of the audit.

Summary Information

The final section of the audit to complete is the (1) Summary information section. This section is an accumulation of supporting documents and attachments that must be provided as part of the audit submission. Each sub-section may include:

2. Guidelines outlining what is expected as a response.
3. An area for providing a written response and/or
4. The ability to attach a document.

After completing this section, the report will contain the following content to be presented in the post-audit meeting:

- Acknowledgement to the organization and management for their efforts and assistance during the audit.
- A short description of the organization being audited including the scope of work, number of employees, number of workplaces, interviews conducted and any other relevant information.
- High level summary of the significant positive findings.
- Summary of the audit by element, listing strengths and areas for improvement.
- Suggestion for management on how to develop, implement and follow-up on the areas for improvement using a corrective action plan.
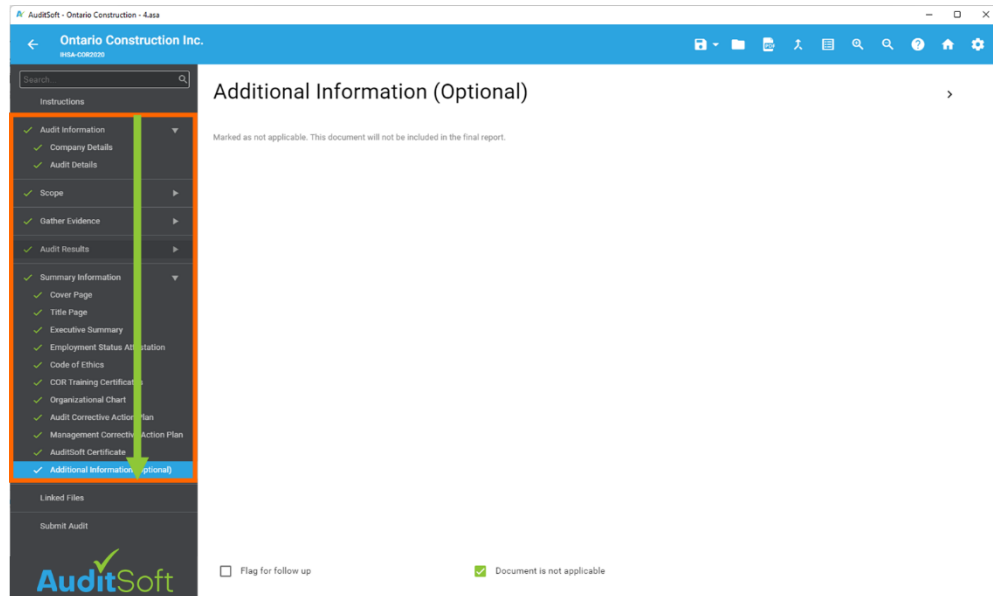
After completing this section your audit has been completed and all the sections in the navigation menu in the left should have a green check mark next to it. It is now time to move to the final section and to submit your audit for quality assurance review.

Review and Submit

You are now ready to review your audit before submitting it:
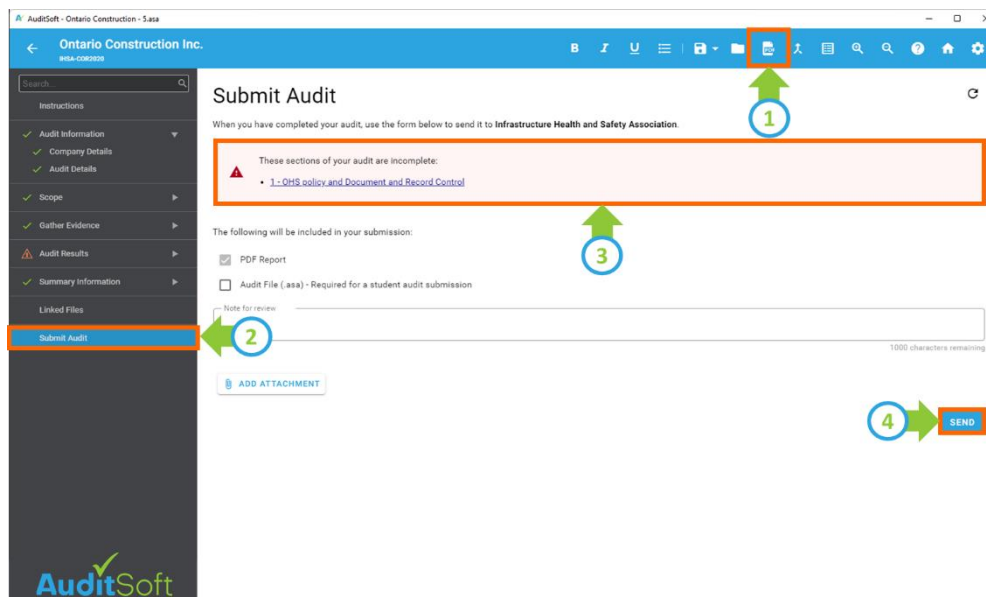
1. The **save PDF report** button in the toolbar will create a draft PDF for you to review.

> ⚠️ You do not have to complete the entire audit to review your PDF draft. You can create a draft at any time even if your audit is only 5% or 10% complete. Drafts are not submitted to IHSA.

> ⚠️ Draft PDF reports will be opened in the default PDF viewer on your computer. Not all free PDF viewers are updated regularly to be compliant with the latest released PDF format changes. It is highly recommended that you install and use the latest version of the Adobe Reader (see https://get.adobe.com/reader) to view the generated draft audit report.

> 🛑 **STOP**
>
> If your total audit score is **less than 80%**, **DO NOT SUBMIT** your audit until you have made suitable improvements to your OHSMS.
>
> If the total score in any individual **Element is less than 65%**, **DO NOT SUBMIT** your audit until you have made suitable improvements to the Element.
>
> If you have scored zero for any of the items marked as **legislated requirements**, **DO NOT SUBMIT** your audit until you have achieved a full score for that legislated requirement

When you have reviewed the draft and you are ready to submit it to IHSA:

2. Select **Submit** from the left navigation menu.
3. Confirm that there are not any incomplete sections in your audit. If there are, click on the link(s) to add additional content and then return to this section.
4. Click **Send** to submit your audit to IHSA for review.

QUESTIONS & SUPPORT

COR™ 2020 Content Questions

For questions related to the content of the audit, for example:

- what exactly is expected as a response or
- where you can get more detail on how to answer a question or
- the question is confusing, can this question be reworded.
- etc.

Please reach out to IHSA, the authors of the COR™ 2020 audit standard, for clarification. They can be reached:

- by email at cor@ihsa.ca

AuditSoft Questions

AuditSoft is a software company that implemented the questions set and guidelines as they were provided by IHSA. AuditSoft cannot change questions, scoring rules, the configuration, or the report and/or wording independent from approval by IHSA.

If you have a question about how the AuditSoft software application works, there is an extensive online manual including many frequently asked question (FAQ) responses that can be accessed at:

- **Online FAQ articles:**   https://AuditSoft.co/support/

Or if you require software support, please contact AuditSoft at:

- **Email:**   support@AuditSoft.co
- **Phone**:   1 (888) 514 3534

SCORING

AuditSoft has implemented automatic calculation and scoring algorithms to simplify the completion of the audit. Each audit question is configured with specific automatic scoring rules that are imbedded within the audit.

The following audit scoring rules have been implemented for IHSA:

Rule #1: Documentation (All-or-Nothing)

- Must be 100% compliant to get all the points.
- 99% compliant or less results in 0 points.
- Examples: 1.1.1, 3.1, 5.1, 9.2.c (see "Rules Applied by Question").

Rule #2: Observation (All-or-Nothing)

- Must be 100% compliant to get all the points.
- 99% compliant or less results in 0 points.
- Applies to only 6.9 (see "Rules Applied by Question").

Rule #3: Interview (All-or-Nothing)

- Must be 51% compliant to get all the points.
- 50% compliant or less results in 0 points.
- Examples: 5.5, 10.4 (see "Rules Applied by Question").

Rule #4: Documentation (Range)

- Multiply the **% Compliant** with the available points and round the result to the nearest integer.
- Examples: 2.3, 2.4, 4.6, 8.1.7, 10.8, 14.2.5 (see "Rules Applied by Question").

Rule #5 & #6: AND (All-or-Nothing)

- The question is verified by averaging the score from two (2) verification methods.
- Use rules #1, #2 and/or #3 to calculate the number of points for each applicable verification method.
- If BOTH verification methods result in 100% of the points, then award all the points.
- If either verification method results in 0 points, then award 0 points.
- Examples Rule #5 (D&I): 1.1.2, 2.9, 5.6, 7.8 (see "Rules Applied by Question").
- Examples Rule #6 (O&I): 2.12, 3.7, 3.9, 6.7 (see "Rules Applied by Question").

Rule #7 & #8: <u>AND</u> (Sub-Range)

- Each verification method is scored independent of the other using the sub-range method described below.
- IHSA Sub-Range scoring rules:
    - 50% compliant or less results in 0 points.
    - 51% or higher will award points based on equal scoring increments above 51%.
    - For example:
        - For a question out of 2 points:

Sub-Range	Resulting Points
0%-50%	0 / 2
51%-75%	1 / 2
76%-100%	2 / 2

        - For a question out of 4 points:

Sub-Range	Resulting Points
0% - 50%	0 / 4
51%-62%	1 / 4
63%-75%	2 / 4
76%-87%	3 / 4
88%-100%*	4 / 4 *

- *Interview* sub-range questions (*) that are scored out of 2 or more points cannot score all the points unless a minimum of 75% has been achieved.
- Examples Rule #7: 3.3, 4.4, 4.5, 6.6, 12.8 (see "Rules Applied by Question").
- Examples Rule #8: 1.1.5, 2.5, 3.4, 10.3 (see "Rules Applied by Question").

In 2023 the following questions were adjusted to fall in this scoring category:

Question 3.3:   2 points for documentation and 2 points for interviews

Question 4.4:   2 points for documentation and 2 points for interviews

Question 4.5:   2 points for documentation and 2 points for interviews

Question 6.6:   2 points for documentation and 2 points for interviews

Question 12.8: 1 point for documentation and 1 point for interviews

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Rule #9: OR (All-or-Nothing)

- The auditor can pick either Observation (see Rule #2) or Interview (see Rule #3)
- Examples: only 3.8, 5.4 (see "Rules Applied by Question").

Rule #10: Legislated (All-or-Nothing)

- This calculation is identical to Rule #1
- If the question does not score all points the audit automatically fails.
- Examples: 1.1.8, 1.1.10. 6.8, 9.5, 11.6, 13.6 (see "Rules Applied by Question").

Rule #11: Legislative OR (All-or-Nothing)

- The auditor can pick either Observation (see Rule #2) or Interview (see Rule #3)
- If the question does not score all points the audit automatically fails.
- Examples: only 1.1.9 (see "Rules Applied by Question").

Rule #12: Legislative "AND" (All-or-Nothing)

- This calculation is identical to Rule #5 and #6
- If the question does not score all points the audit automatically fails.
- Examples: 9.6, 11.9, 11.11, 11.13 (see "Rules Applied by Question").

Rules Applied by Question

Please refer to the previous section for a description of each scoring rule.

Question	Rule #	Question	Rule #	Question	Rule #	Question	Rule #
1.1.1	1	4.6	4 (N/A)	8.2.2.f	1	11.16	12
1.1.2	5	4.7	1	8.2.2.g	1	11.17	1
1.1.3	1	5.1	1	8.2.2.h	1	11.18	1
1.1.4	1	5.2.a	1	8.2.3	5	12.1	1
1.1.5	8	5.2.b	1	8.2.4	5	12.2.a	1
1.1.6	1	5.2.c	1	8.2.5	5	12.2.b	1
1.1.7	1	5.2.d	1	8.2.6	1	12.2.c	1
1.1.8	10	5.2.e	1	8.2.7	1	12.2.d	1
1.1.9	11	5.2.f	1	9.1	1	12.2.e	1
1.1.10	10	5.3	1	9.2.a	1	12.2.f	1
1.1.11	8	5.4	9	9.2.b	1	12.2.g	1
1.2.1.a	1	5.5	3	9.2.c	1	12.2.h	1
1.2.1.b	1	5.6	5	9.2.d	1	12.2.i	1
1.2.1.c	1	5.7	1	9.2.e	1	12.3	1
1.2.1.d	1	6.1	1	9.2.f	1	12.4	1
1.2.1.e	1	6.2.a	1	9.2.g	1	12.5	1
1.2.1.f	1	6.2.b	1	9.2.h	1	12.6	1
1.2.1.g	1	6.2.c	1	9.2.i	1	12.7	1
1.2.1.h	1	6.2.d	1	9.3	1	12.8	8
1.2.1.i	1	6.2.e	1	9.4	10	12.9	1
1.2.1.j	1	6.2.f	1	9.5	10	13.1	1
1.2.1.k	1	6.2.g	1	9.6	12	13.2.a	1
2.1	1	6.2.h	1	9.7	1	13.2.b	1
2.2.a	1	6.3	4	9.8	5	13.2.c	1
2.2.b	1	6.4	5	9.9	1	13.2.d	1
2.2.c	1	6.5	5	9.10	5	13.2.e	1
2.2.d	1	6.6	8	9.11	5	13.2.f	1
2.2.e	1	6.7	6	9.12	1	13.2.g	1
2.2.f	1	6.8	10	10.1	1	13.3	4
2.2.g	1	6.9	2	10.2.a	1	13.4	4
2.2.h	1	6.10	1	10.2.b	1	13.5	12
2.2.i	1	7.1	1	10.2.c	1	13.6	10
2.2.j	1	7.2.a	1	10.2.d	1	13.7	1
2.2.k	1	7.2.b	1	10.2.e	1	14.1.1	1
2.2.l	1	7.2.c	1	10.2.f	1	14.1.2.a	1
2.2.m	1	7.2.d	1	10.2.g	1	14.1.2.b(i)	1
2.3	4	7.2.e	1	10.2.h	1	14.1.2.b(ii)	1

Question	Rule #	Question	Rule #	Question	Rule #	Question	Rule #
2.4	4	7.2.f	1	10.2.i	1	14.1.2.b(iii)	1
2.5	8	7.2.g	1	10.3	8	14.1.2.b(iv)	1
2.6	8	7.2.h	1	10.4	3	14.1.2.b(v)	1
2.7	1	7.3	1	10.5	5	14.1.2.b(vi)	1
2.8	1	7.4	1	10.6	1 (N/A)	14.1.2.b(vii)	1
2.9	5	7.5	1	10.7	4 (N/A)	14.1.2.b(viii)	1
2.10	1	7.6	1	10.8	4 (N/A)	14.1.2.b(ix)	1
2.11	5	7.7	1	10.9	8	14.1.2.b(x)	1
2.12	6	7.8	5	10.10	1 (N/A)	14.1.2.b(xi)	1
2.13	1	7.9	1	10.11	1	14.1.2.b(xii)	1
3.1	1	7.10	1	11.1	1	14.1.2.c(i)	1
3.2.a	1	8.1.1	1	11.2.a	1	14.1.2.c(ii)	1
3.2.b	1	8.1.2.a	1	11.2.b	1	14.1.2.c(iii)	1
3.2.c	1	8.1.2.b	1	11.2.c	1	14.1.2.c(iv)	1
3.2.d	1	8.1.2.c	1	11.2.d	1	14.1.2.c(v)	1
3.2.e	1	8.1.2.d	1	11.2.e	1	14.1.2.c(vi)	1
3.2.f	1	8.1.2.e	1	11.2.f	1	14.1.2.c(vii)	1
3.2.g	1	8.1.2.f	1	11.2.g	1	14.1.2.d	1
3.2.h	1	8.1.2.g	1	11.2.h	1	14.1.2.e	1
3.3	8	8.1.2.h	1	11.2.i	1	14.1.3	4
3.4	8	8.1.2.i	1	11.2.j	1	14.1.4	4
3.5	4	8.1.3	4	11.2.k	1	14.1.5	1
3.6	1	8.1.4	4	11.2.l	1	14.1.6	1
3.7	6	8.1.5	4	11.2.m	1	14.1.7	8
3.8	9	8.1.6	10	11.2.n	1	14.1.8	1
3.9	6	8.1.7	4	11.3	8	14.2.1	1
3.10	8	8.1.8	5	11.4	1	14.2.2.a	1
3.11	1	8.1.9	1	11.5	5	14.2.2.b(i)	1
4.1	1	8.1.10	5	11.6	10	14.2.2.b(ii)	1
4.2.a	1	8.1.11	1	11.7	8	14.2.2.b(iii)	1
4.2.b	1	8.1.12	1	11.8	1	14.2.2.b(iv)	1
4.2.c	1	8.1.13	1	11.9	12	14.2.2.c	1
4.2.d	1	8.2.1	1	11.10	1	14.2.2.d	1
4.2.e	1	8.2.2.a	1	11.11	12	14.2.3	4 (N/A)
4.2.f	1	8.2.2.b	1	11.12	1	14.2.4	4 (N/A)
4.3	4 (N/A)	8.2.2.c	1	11.13	12	14.2.5	4 (N/A)
4.4	8 (N/A)	8.2.2.d	1	11.14	12	14.2.6	1
4.5	8 (N/A)	8.2.2.e	1	11.15	10		