Appendix A:

Self-Evaluation for CHASE – Minnesota

**Eligibility: To determine which level of the CHASE-MINNESOTA partnership a contractor can qualify as a participant, the applicant must provide the chapter’s designated representative with documentation supporting each requirement listed below for the specific level. Annually, the contractor may renew its participation in the partnership. If the contractor wants to proceed to a higher level after one year, the contractor must meet all requirements for a higher level.**

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| **Safety Plan**  |
|  | **Level 1:**  |
|  |  | Develop and implement a comprehensive written safety and health program based on the ANSI A10.38-2000 Guidelines or the OSHA 1989 Safety and Health Program Management Guidelines; it must include a written A Workplace Accident and Injury Reduction (AWAIR) program and Employee Right-to-Know (ERTK) program. The written program shall incorporate in its entirety 29 CFR 1926 Subpart C of the General Safety & Health Provisions. For the purpose of evaluating the implementation of safety programs for existing and prospective program participants, this program allows AGC of MN designated representative(s) access to project sites throughout Minnesota. Coordination for visits will be made initially with the contractor’s partnership contact and, thereafter, with the project superintendent and/or foreman. | ☐YES | ☐NO |
|  | **Level 2:**  |
|  |  | Develop and implement a comprehensive written safety and health program based on the ANSI A10.38-2000 Guidelines or the OSHA 1989 Safety and Health Program Management Guidelines; it must include a written A Workplace Accident and Injury Reduction (AWAIR) program and Employee Right-to-Know (ERTK) program. The written program shall incorporate in its entirety 29 CFR 1926 Subpart C of the General Safety & Health Provisions. For the purpose of evaluating the implementation of safety programs for existing and prospective program participants, this program allows AGC of MN designated representative(s) access to project sites throughout Minnesota. Coordination for visits will be made initially with the contractor’s partnership contact and, thereafter, with the project superintendent and/or foreman. | ☐YES | ☐NO |
|  | **Level 3:**  |
|  |  | Develop and implement a comprehensive written safety and health program based on the ANSI A10.38-2000 Guidelines or the OSHA 1989 Safety and Health Program Management Guidelines; it must include a written A Workplace Accident and Injury Reduction (AWAIR) program and Employee Right-to-Know (ERTK) program. The written program shall incorporate in its entirety 29 CFR 1926 Subpart C of the General Safety & Health Provisions. For the purpose of evaluating the implementation of safety programs for existing and prospective program participants, this program allows AGC of MN designated representative(s) access to project sites throughout Minnesota. Coordination for visits will be made initially with the contractor’s partnership contact and, thereafter, with the project superintendent and/or foreman. | ☐YES | ☐NO |
|  |  | Contractor maintains a copy of its specialty contractor’s safety and health plan, including a written (AWAIR) program, Employee Right-to-Know program, and fall protection plan (where applicable) or contractor requires specialty contractor to follow Level 3 participants plan | ☐YES | ☐NO |
|  |  | Ensure, through inspection, that any written, site-specific, safety and health plan is incorporated by those subcontractors that have a direct written contract with the applicant. | ☐YES | ☐NO |

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| **Safety Representative(s)** |
|  | **Level 1:**  |
|  |  | Assign at least one *trained person* with responsibility for employee safety to administer the participant’s safety and health program and to conduct documented safety and health inspections of ongoing work. A trained employee is one who has completed a 30-hour construction training course or safety training equivalent to the 30-hour course within the first 12 months of joining the partnership. Documented ongoing use of a safety consultant or MNOSHA Workplace Safety Consultation may satisfy this requirement. | ☐YES | ☐NO |
|  | **Level 2:**  |
|  |  | Assign at least one *trained person* with responsibility for employee safety to administer the participant’s safety and health program and to conduct documented safety and health inspections of ongoing work. A trained employee is one who has completed a 30-hour construction training course or safety training equivalent to the 30-hour course. This employee must be dedicated to safety for at least 50 percent of their time.  | ☐YES | ☐NO |
|  | **Level 3:**  |
|  |  | Contractor has **an employee** who administers the **firm’s safety** and health program and conducts documented safety inspections of all work. The employee has completed the AGC Safety Management Course or equivalent in the previous three years.. | ☐YES | ☐NO |
|  |  | Contractor has **designated safety personnel at each site** who conduct documented safety inspections of all work on the contractor’s projects, and through training and experience, can recognize hazards and have authority to take prompt corrective action. Training equivalent to the OSHA 30-Hour Construction Outreach Course is satisfactory. | ☐YES | ☐NO |

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| **New Hire Orientation(s)** |
|  | **Level 1:**  |
|  |  | Conduct an orientation of all new employees in the safety and health program of the company and show evidence of effective employee training for avoidance of hazards specific to the contractor's worksite(s); for example, pairing veteran workers (as mentors) with workers new to the construction industry. | ☐YES | ☐NO |
|  | **Level 2:**  |
|  |  | Conduct an orientation of all new employees in the safety and health program of the company and show evidence of effective employee training for avoidance of hazards specific to the contractor's worksite(s); for example, pairing veteran workers (as mentors) with workers new to the construction industry. | ☐YES | ☐NO |
|  | **Level 3:**  |
|  |  | Conduct an orientation of all new employees in the safety and health program of the company and show evidence of effective employee training for avoidance of hazards specific to the contractor's worksite(s); for example, pairing veteran workers (as mentors) with workers new to the construction industry. | ☐YES | ☐NO |

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| **Toolbox Talks / Weekly Safety Huddles** |
|  | **Level 1:**  |
|  |  | Contractor conducts and documents weekly employee safety meetings. | ☐YES | ☐NO |
|  | **Level 2:**  |
|  |  | Contractor conducts and documents weekly employee safety meetings. | ☐YES | ☐NO |
|  | **Level 3:**  |
|  |  | Contractor conducts and documents weekly employee safety meetings. | ☐YES | ☐NO |

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| **Substance Abuse Policy** |
|  | **Level 1:**  |
|  |  | Develop, implement and maintain a prohibited substance policy and testing program that complies with applicable laws, statutes and agreements. A state-licensed employee assistance program shall be available to any employee covered by the testing program. | ☐YES | ☐NO |
|  | **Level 2:**  |
|  |  | Develop, implement and maintain a prohibited substance policy and testing program that complies with applicable laws, statutes and agreements. A state-licensed employee assistance program shall be available to any employee covered by the testing program. | ☐YES | ☐NO |
|  | **Level 3:**  |
|  |  | Develop, implement and maintain a prohibited substance policy and testing program that complies with applicable laws, statutes and agreements. A state-licensed employee assistance program shall be available to any employee covered by the testing program. | ☐YES | ☐NO |

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| **Fall Protection**  |
|  | **Level 1:**  |
|  |  | Implement a six-foot fall-protection policy for work governed by OSHA Standards for Construction 1926, Subparts L, M and R. (6' all trades) | ☐YES | ☐NO |
|  | **Level 2:**  |
|  |  | Implement a six-foot fall-protection policy for work governed by OSHA Standards for Construction 1926, Subparts L, M and R. (6' all trades) | ☐YES | ☐NO |
|  | **Level 3:**  |
|  |  | Implement a six-foot fall-protection policy for work governed by OSHA Standards for Construction 1926, Subparts L, M and R. (6' all trades) | ☐YES | ☐NO |

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| **Historical OSHA Violations** |
|  | **Level 1:**  |
|  |  | Contractor has not received a willful violation which became final in the last three years. | ☐YES | ☐NO |
|  |  | Have no fatalities or catastrophes within the past three years that resulted in serious or willful citations related to the incident. | ☐YES | ☐NO |
|  | **Level 2:**  |
|  |  | Contractor has not received a willful violation which became final in the last three years. | ☐YES | ☐NO |
|  |  | Contractor has not received a repeated serious violation which became final in the last three years. | ☐YES | ☐NO |
|  |  | Have no fatalities or catastrophes within the past three years that resulted in serious or willful citations related to the incident. | ☐YES | ☐NO |
|  | **Level 3:**  |
|  |  | Contractor has not received a willful violation which became final in the last three years. | ☐YES | ☐NO |
|  |  | Contractor has not received a repeated violation which became final in the last three years. | ☐YES | ☐NO |
|  |  | Have no fatalities or catastrophes within the past three years that resulted in serious or willful citations related to the incident. | ☐YES | ☐NO |

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| **Employee Involvement** |
|  | **Level 1:**  |
|  |  | Show documentation of employee involvement in the safety and health program. A safety committee, comprising company employees and management, or participation of employees in self-audits, site inspections, job hazard analysis, safety and health program reviews, safety training and incident near-miss or accident investigations would be acceptable. | ☐YES | ☐NO |
|  | **Level 2:**  |
|  |  | Show documentation of employee involvement in the safety and health program. A safety committee, comprising company employees and management, or participation of employees in self-audits, site inspections, job hazard analysis, safety and health program reviews, safety training and incident near-miss or accident investigations would be acceptable. | ☐YES | ☐NO |
|  | **Level 3:**  |
|  |  | Show documentation of employee involvement in the safety and health program. A safety committee, comprising company employees and management, or participation of employees in self-audits, site inspections, job hazard analysis, safety and health program reviews, safety training and incident near-miss or accident investigations would be acceptable. | ☐YES | ☐NO |

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| **External Site Audits / Inspections** |
|  | **Level 1:**  |
|  |  | Receive an annual inspection of at least one representative jobsite by the AGC of MN representative(s). | ☐YES | ☐NO |
|  | **Level 2:**  |
|  |  | Receive an annual and qualifying inspection of at least one representative jobsite by the AGC of MN representative(s). | ☐YES | ☐NO |
|  | **Level 3:**  |
|  |  | Contractor shall participate in MNOSHA Cooperative Complaince Partnership, whenever feasible. (\*monthly) | ☐YES | ☐NO |
|  |  | Applicants are required to participate in MNOSHA Workplace Safety Consultation Program, whenever feasible. (\*above 18 month duration) | ☐YES | ☐NO |

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| **Internal Site Inspections / Audits** |
|  | **Level 1:**  |
|  |  | Conduct and document site safety inspections. Site safety inspections must be conducted as often as needed to assure safety, but for the purposes of this partnership, audits must be documented on at least a weekly basis. The size of the job will dictate whether more frequent documentation is needed. This requirement applies to the general contractor, subcontractor and tier subcontractors. | ☐YES | ☐NO |
|  | **Level 2:**  |
|  |  | Conduct and document site safety inspections. Site safety inspections must be conducted as often as needed to assure safety, but for the purposes of this partnership, audits must be documented on at least a weekly basis. The size of the job will dictate whether more frequent documentation is needed. This requirement applies to the general contractor, subcontractor and tier subcontractors. | ☐YES | ☐NO |
|  | **Level 3:**  |
|  |  | Conduct and document site safety inspections. Site safety inspections must be conducted as often as needed to assure safety, but for the purposes of this partnership, audits must be documented on at least a weekly basis. The size of the job will dictate whether more frequent documentation is needed. This requirement applies to the general contractor, subcontractor and tier subcontractors. | ☐YES | ☐NO |

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| **Total Case Injury / Illness Incidence Rate** |
|  | **Level 1:**  |
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|  | **Level 2:**  |
|  |  | Maintain a total case injury/illness incidence rate (three-year average) that is at or below the most current Bureau of Labor Statistics**,** state of Minnesota rate for the applicant's three-digit North American Industrial Classification System (NAICS) code. The most recent numbers will usually be those from the previous calendar year. | ☐YES | ☐NO |
|  | **Level 3:**  |
|  |  | Maintain a total case injury/illness incidence rate (three-year average) that is at or **30% below** the most current Bureau of Labor Statistics**,** state of Minnesota rate for the applicant's three-digit North American Industrial Classification System (NAICS) code. The most recent numbers will usually be those from the previous calendar year. | ☐YES | ☐NO |

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| **Formal Safety Education (Production Supervisory Staff)**  |
|  | **Level 1:**  |
|  |  | Train all field construction supervisory personnel (anyone in the field who is authorized to assign or make decisions about the work) must complete the OSHA 10-hour course in construction or equivalent. The applicant agrees to secure this training for a minimum of 30% of this group within the first year after application.  | ☐YES | ☐NO |
|  | **Level 2:**  |
|  |  | Train all field construction supervisory personnel (anyone in the field who is authorized to assign or make decisions about the work) must complete the OSHA 10-hour course in construction or equivalent. | ☐YES | ☐NO |
|  |  | Train all field construction supervisory personnel (anyone in the field who is authorized to assign or make decisions about the work) must complete the OSHA 30-hour course in construction or equivalent. The applicant agrees to secure this training for a minimum of 30% of this group within the first year after application.  | ☐YES | ☐NO |
|  | **Level 3:**  |
|  |  | Train all field construction supervisory personnel (anyone in the field who is authorized to assign or make decisions about the work) must complete the OSHA 10-hour course in construction or equivalent. | ☐YES | ☐NO |
|  |  | Train all field construction supervisory personnel (anyone in the field who is authorized to assign or make decisions about the work) must complete the OSHA 30-hour course in construction or equivalent. | ☐YES | ☐NO |

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| **Annnual Reporting** |
|  | **Level 1:**  |
|  |  | Submit annual activity reports to AGC of MN. | ☐YES | ☐NO |
|  | **Level 2:**  |
|  |  | Submit annual activity reports to AGC of MN. | ☐YES | ☐NO |
|  | **Level 3:**  |
|  |  | Submit annual activity reports to AGC of MN. | ☐YES | ☐NO |

If the applicant has answered “no” to any of the questions listed above a respective level, then the applicant is not eligible to become a partnership participant in in that CHASE Level.

If the applicant has answered “yes” to all of the questions at a certain level, then the applicant is eligible to become a partnership participant at that level for one year, and must receive a qualifying inspection, by the Minnesota OSHA Compliance Occupational Safety and Health Division, in conjunction with the AGC Safety Committee’s designated representatives; of at least one representative active jobsite.

Level 3. Contractors can apply for participation in this partnership program for construction projects to last a minimum of six months, but fewer than 18 months. Project type is not restrictive, and participation will be available to smaller contractor businesses.

The contractor must immediately correct any serious hazard found during any MNOSHA compliance assistance site visit; MNOSHA will disqualify any employer that fails to do so.

**Evaluation Comments:**

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Signature of Evaluator / Company Contact Date

Written Program meets CHASE – MINNESOTA requirements: \_\_\_\_\_\_ Yes \_\_\_\_\_ No

It is recommended that participation in the CHASE – MINNESOTA at Level **1 2 3** (Circle one)