



ACSA COR Maintenance Action Plan Form

Please submit this completed application form after assessing your eligibility. The Action Plan approach to COR Maintenance expands your company's health and safety management system, while strengthening its alignment with your company's important corporate objectives.

Eligibility Requirements

1. At least one full-time employee at your company must hold the required COR training.
2. Your company must have completed at least one full three-year COR Cycle.
3. Your company must also have achieved a minimum of 85% on your last external audit, (or if applying for a 2nd action plan year, you must have achieved a minimum of 80% on 1st year action plan).

Action Plan Application Form

All questions must be answered in full and in as much detail as possible. To save time and ensure accuracy, please complete this form electronically. Handwritten forms may cause unnecessary delays.

Company Legal Name(s): _____

WCB Account Number(s): _____ Industry Code(s): _____

Number of Employees: _____ # of Work-sites: _____

Contact(s): _____ Contact Phone: _____

Contact Email: _____

Note: Please ensure all WCB accounts covered by your existing COR are listed in order to maintain certification for each.

Required COR Course	Name of Individual	Certificate #	Date Completed
Principles of Health & Safety Management			
Leadership for Safety Excellence			
Alberta OH&S Legislation Awareness			
Auditor Training Program			

Auditor Maintenance	Name of Individual	Auditor Certificate #	Expiry Date
List all Action Plan Participants			



Instructions for Action Plan Development

Objectives must be:

- Based on recommendations from previous year's audit (minimum of 1) or corporate health and safety priorities
- SMART – Specific, Measurable, Attainable, Realistic, Time-bound
- 3 – 7 Total

Milestones within Objectives must include:

- The breakdown of objectives into specific steps indicating completion of significant activities
- Specific Individual/Group Responsibility, Target Date(s), Deliverable(s), and Score(s)/Weighting
- Minimum of 2, Maximum of 5 milestones for each objective

Deliverables for each Milestone:

- Supporting documentation that will be submitted as evidence of completion of Milestones within the Objectives
- Must be completed and submitted by November 15th (*Action Plans may not be carried over into the following year.*)

Weighting for each Milestone:

- The total score for all Milestones must equal 100 (see running total on top of next page). Each Milestone requires its own score

Submission Checklist

- ☐ Completed Action Plan – Objectives, Milestones, Deliverables, Weighting
- ☐ Completed Company Information Page
- ☐ Company Profile
- ☐ Organization Chart / Breakdown of Employee Positions

By signing, you acknowledge your understanding and agreement with the information provided.

Signature: _____

Date: _____

Action Plan Total Score (must be 100)

Objective 1

Click check box if
objective based on
previous audit
recommendation

☐

Milestones (breakdown of milestones or significant activities to complete objective; min 2 to max 5)	Responsibility (individual or group assigned)	Target Date (for completion; plan due Nov)	Deliverables (submitted to ACSA as evidence of completion)	Weighting (added to total score)	Self Score (by company on completion)
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				Totals for Objective 1	

Self
Scoring
Notes



Click check box if objective based on previous audit recommendation

(breakdown of milestones or significant activities to complete objective; min 2 to max 5)

(individual or group assigned)

(for completion;
plan due Nov)

(submitted to ACSA as
evidence of completion)

(added to
total score)

(by company
on completion)

Activity	Duration	Resources	Cost	Impact	Notes
			Totals for Objective 2		

Self Scoring Notes

Click check box if
objective based on
previous audit
recommendation

Totals for Objective 3

Self Scoring Notes

Click check box if objective based on previous audit recommendation ☐

Click check box if objective based on previous audit recommendation

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(breakdown of milestones or significant activities to complete objective; min 2 to max 5)

(breakdown of milestones or significant activities to complete objective; min 2 to max 5)

(individual or group assigned)

(individual or group assigned)

(for completion;
plan due Nov)

(for completion;
plan due Nov)

(submitted to ACSA as
evidence of completion)

(submitted to ACSA as
evidence of completion)

(added to
total score)

(added to
total score)

(by company
on completion)

(by company
on completion)

				Totals for Objective 4	

Self Scoring Notes

Click check box if objective based on previous audit recommendation

Milestones (breakdown of milestones or significant activities to complete objective; min 2 to max 5)	Responsibility (individual or group assigned)	Target Date (for completion; plan due Nov)	Deliverables (submitted to ACSA as evidence of completion)	Weighting (added to total score)	Self Score (by company on completion)
				Totals for Objective 5	

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Click check box if based on previous audit recommendation.

(breakdown of milestones or significant activities to complete objective; min 2 to max 5)

(breakdown of milestones or significant activities to complete objective; min 2 to max 5)

(individual or group assigned)

(individual or group assigned)

(for completion;
plan due Nov)

(for completion;
plan due Nov)

(submitted to ACSA as
evidence of completion)

(submitted to ACSA as
evidence of completion)

(added to
total score)

(added to
total score)

(by company
on completion)

(by company
on completion)

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Totals for Objective 6

Self Scoring Notes

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Click check box if objective based on previous audit recommendation

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Self Scoring Notes



Executive Summary

Final Self Score /100

Strengths & Recommendation

Submission Self-Check

- ☐ Submit all deliverables organized by objective & milestone.
- ☐ Complete Executive Summary: including overall results with positive areas, and recommendations. Include action plan representative and senior company representative signatures.
- ☐ Submit package electronically by November 15th deadline.
- ☐ Complete self-scoring notes for each objective to demonstrate how the score was determined.

Action Plan Representative – Signature

By signing, you acknowledge your understanding and agreement with the information provided.

Signature: _____

Date: _____

Senior Company Representative – Signature

By signing, you acknowledge your understanding and agreement with the information provided.

Name: _____

Signature: _____

Date: _____