

Health & Safety Administrator (HSA)

The objective of the HSA program is to provide formal training for the administrator of a health and safety program, who does not possess a minimum of 3 years construction field experience. The HSA can provide valuable assistance to employers and their Construction Safety Officer(s) in the administration and implementation of the company's health and safety program. This designation indicates to employers that the participant has attained theoretical knowledge in various health and safety management applications and principles.

NOTE: The Health and Safety Administrator is a Provincial Designation.

To Apply:

Complete all compulsory and elective course requirements
Complete the attached application form
Include application fee of \$50.00 plus HST
Include signed Code of Ethics

****Application must be received and approved one month prior to the exam date.**

Eligibility

Once your application is received and reviewed- NBCSA will notify you of your eligibility to write the provincial general knowledge exam.

Designation

Upon successful completion of the HSA general knowledge exam (passing grade of 75% or better) Your Health and Safety Administrator certificate will be mailed to you at your home address.

Resources

Contact the New Brunswick Construction Safety Association (NBCSA) regarding this program at:

NBCSA
PO Box 731
Miramichi, NB
EIV 3V4

Phone: (506)-627-1477
Toll Free: 1-877-382-7233
Fax: (506)-624-9581
Email: lindy@nbcsa.ca

Applicant: _____ Date: _____

Date of Birth: _____ Address: _____

| Compulsory Courses | Completed | Documentation/ Verification submitted to NBCSA |
|--|------------------|---|
| Principles of Loss Control | | |
| Principles of Loss Control Audit | | |
| Leadership for Safety Excellence | | |
| WHMIS 2015 Train the Trainer or Train the Trainer | | |
| Hazard Identification and Control | | |
| WHMIS | | |
| Safety Orientation | | |
| Workplace First Aid | | |
| Construction Safety Administration (Last course taken) | | |
| Electives (three required) | Completed | Documentation/ Verification submitted to NBCSA |
| Fall Protection Basics for Workers | | |
| Confined Space Entry Awareness | | |
| Trenching Awareness | | |
| Incident Investigation | | |
| Transportation of Dangerous goods | | |
| Lockout Awareness | | |
| Traffic Control Person | | |
| Workplace Area Traffic Control Manual (WATCHM) | | |
| Manlift Awareness | | |
| Forklift Operator | | |
| Rigging Awareness | | |
| Harassment Awareness | | |
| Leading For Cultural Change | | |
| Compulsory Application | Completed | Documentation/ Verification submitted to NBCSA |
| Code of Ethics (Reviewed in CSA™ course) | | |

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Code of Ethics

Health and Safety Administrator

The HSA shall:

1. Practice sound judgment.
2. Recognize professional limitations and competencies.
3. Practice the highest standards of honesty and integrity.
4. Represent themselves, their qualifications, and their experience accurately.
5. Promote and uphold the distinction of the safety profession.
6. Avoid conflicts of interest.
7. Protect confidential information and share only when legally obligated.
8. Respect dignity, diversity, human rights, and employment standards.
9. Continue professional growth and development.
10. Support the efforts of other safety practitioners.

I, _____ have read, understand, and will comply with the HSA *Code of Ethics* as written above. I realize that any breach of the *Code of Ethics* may result in a formal review and subsequent suspension or termination of my HSA designation.

Signature

Date