

It's the start of a new year and what better time to review our safety plans. For this month's safety information, we are sharing a Safety Program Evaluation sheet prepared by Gary Hanson of American Safety & Health. We encourage all employers to utilize this form, to evaluate their programs and see if there is room for improvement.

SAFETY PROGRAM EVALUATION

Company Name:		Business Phone:	al Audit - Co				
Addre	ess:	Type of Business:					
		Contact Person: _					
Numb	er of Employees SURVEY IS WORTH 200 POINTS (EACH QU	Total	_points	s		%	
THIS	SURVEY IS WORTH 200 POINTS (EACH QU	Point Value	(4) YES	(2) SW	(0) NO	(4) N/A	
MANA	AGEMENT						
1.	Do you have a written Safety and Health Pol in place, which is signed by the President or management representative?						
2.	Has a copy been posted in the work area an All new employees at the time of hire?	d reviewed with					
3.	Does senior management take an active role supporting the safety efforts of the company						
4.	Have clear safety responsibilities been deve for management/supervisors?	loped					
5.	Is there a list of Safe Work Rules and Emplo Safety Responsibilities?	yee					
6.	Is there an active effort to get employees invin the safety program?	olved					
7.	Is there a Safety Committee in place?				_		
8.	Is there a Suggestion Program in place that allow employees to make recommendations improve the safety program?						
9.	Is there a written safety policy manual in place	ce?					

10.	Have job specific safety guidelines been written for the specific jobs?	 		
11.	Has an appropriate level management individual been designated as the company Safety Coordinator?	 		
12.	Has this individual received training in these responsibilities and duties?	 		
13.	Does this employee have the authority necessary to ensure company safety policies are implemented and enforced?	 		
14.	Is there a Transitional Duty program in place?	 		
15.	Is there a safety/housekeeping inspection program in place?	 		
16.	Are items noted on the inspection corrected as soon as possible?	 		
17.	Is there a Monthly Injury Report generated, reviewed for repeat injury types and individuals and communicated to all management and hourly employees?	 _		
18.	Are all accidents investigated properly and a detailed accident report filled out?	 		
19.	Are employees with safety related problems counseled on their behavior?	 		
20.	Is a background check done on employees required to drive a company vehicle?	 		
Traini	•			
21.	Is there a New Employee Safety Orientation training program in place covering the company's safety program, specific job safety procedures and required OSHA mandated training?	 	_	
22.	Has any management employee been trained in how to conduct employee safety training?	 		
23.	Have employees been trained in proper lifting procedures?	 		
24.	Is there an employee safety handbook given out to all new employees?	 		
25.	Have appropriate employees been trained in the proper use of fire extinguishers?	 		
26.	Are employees trained in the proper handling, storage and emergency procedures for flammable liquids?	 		
27.	Have employees been trained in the proper use and inspection of portable ladders?	 		

OSHA					
28.	Are emergency telephone numbers posted in the facility?				
29.	Are fire extinguishers hung up in a clear area?				
30.	Are fire extinguishers inspected monthly?				
31.	Are the OSHA 300 Logs up to date for the past 5 years? (For companies required to complete & post the log).				
32. 33.	Are adequate first aid supplies provided and located in accessible areas for employees? Is there an inspection program for hand and portable power tools?		_		_
34.	Is there a written Emergency Evacuation Program?			— <u>-</u> —	
35.	Is annual refresher training conducted covering the emergency evacuation plan?				
36.	Is all machinery guarded or supplied with acceptable alternative protection?				
37.	Is there a written Hazard Communication Program in place?				
38.	Have all employees been trained in Hazard Communication per OSHA guidelines?				
39.	Are SDSs up to date & available for review and all containers of Hazardous Chemicals labeled properly?	~			
40.	Do you have a written Forklift Program in place?				
41.	Have all employees been trained and certified in forklift operation?	 -			
42.	Have guidelines been developed for the use of Personal Protective Equipment?			 -	
43.	Have employees been trained in the proper use, care and sanitation of Personal Protective Equipment?				
44.	Is there a Bloodborne Pathogens Program in place?				
45.	Have employees been trained in protective measures?				
46.	Is there a written Lockout/Tagout Program in place?				
47.	Have written Lockout/Tagout Procedures been developed for all equipment requiring a written procedure.			 -	
48.	Have all authorized, affected, and other employees been trained?				
49.	Is there a written Confined Space Entry Program?				

50. Have all Qualified Employees been trained in all Electrical Safe Work Practices and Arc Flash Hazards?							
	YES	NO	SW = SOMEWHAT	N/A = NOT APPLICABLE			
Program Evaluation 180 - 200 160 - 179 140 - 159 139 - Below		Outstanding Good Needs Improve	n - Total 200 Points Outstanding				
Dept	.:	Su	SAFETY INSPECTION pervisor:	Date:			
	sekeeping: No N/A	4					
Yes ——	NO N/F	1. Are all ais		nd kept clear? onthly and located in an easily			
		4. Are equip5. Are supplied6. Is there and	ment and machines clear ies and tools stored prope dequate lighting in the are				
		8. Are exit do	oors clearly marked and k	kept clear at all times? Sins and kept out of the aisleway?			
Com	ments:						
Worl Yes	K Areas: No N/A	1. Are floors 2. Do stairs leading weight cape weight cape 4. Are platform 5. Are Emerged 6. Are all concape guard 7. Are SDS's 8. Are contape 9. Are eyews 10. Are first a 11. Are written Procedure	ge racks maintained in a spacity? rms and floor openings gragency Evacuation maps propersed gas cylinders so in place when not in uses available for employee riners of Hazardous Chemash stations working propid supplies in good order? In lockout/tagout procedure?	d where necessary, guardrails? safe condition and labeled for uarded properly? costed? tored and properly chained with their e? review? nicals labeled properly? perly and kept clear? ? res by each machine requiring a written			
_		Required -	mit Required Confined Specification of Confined Space"? Its inspected before each a	pace locations have a sign – "Permit shift they are used on?			

Comr	nents:		
Mach	ine G	uardin	g & Protection:
Yes		N/A	,
			1. Are all belts, gears, flywheels and pulleys guarded adequately?
			2. Are points of operation guarded adequately?
			3. Are operating controls & stop buttons clearly marked & operating properly
			4. Are grinders supplied with tongue guards adjusted to within 1/4" of the
			wheel and work rests adjusted to within 1/8" of the wheel?
			5. Do drill presses have a chip guard?
			6. Are table saws supplied with a blade cover guard?
Comr	nents:		
Hand	l & Po	wer To	ole:
Yes		Wei 10 N/A	ois.
		,, .	1. Are appropriate hand tools being supplied for the work required?
			2. Are the tools in good shape?
			3. Are tools placed in proper storage when not in use?
			4. Are damaged tools repaired or replaced immediately?
			5. Are all guards in place?
			6. Are electrical plugs and cords in good condition?
			7. Are the proper power tools being supplied for the job being performed?
Comr	nents:		
Ladd	ers:		
Yes	No	N/A	
			Are the ladder rungs in good repair?
			2. Are side rails free of cracks?
			3. Are ladders inspected on a regular basis by a competent person?
			4. Are hinges in good working order and locked in place? 5. Are employees trained in the proper use of ladders?
			5. Are employees trained in the proper use of ladders? 6. Are ladders stored properly when not in use?
			6. Are ladders stored properly when not in use?7. Are only industrial grade ladders (250 lbs.) provided for use?
			1. The only industrial grade ladders (200 lbs.) provided for doc.
Comr	nents:		

Electrical: Yes No N/A	and kept out of
Other items that were noted during the inspection:	
Supervisor Signature	