

Spot Check Safety

Company name: COMPANYNAME

Date: 2022-07-23

Employee/Consultant name: Form Loco

Location: CALGARY

Evaluator: Form Loco

Supervisor: Alvin

WORKSITE SAFETY MANAGEMENT REVIEW	Not Applicable (N/A) Unsatisfactory (U) Satisfactory (S)
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Hazard Identification and Control	N/A	U	S
Are equipment and vehicles inspected, and at what frequency? (Examples and documentation)			✓
Is there a system for hazard assessment, reporting and follow-up? (Written or verbal)		✓	
Comments: HAZARD COMMENT			

Rules and Work Procedure	N/A	U	S
Are there procedures for high risk or critical work? Are they available and used?			✓
Are there written emergency plans available and communicated to personnel on the work site?		✓	
Comments: RULES COMMENT			

Incident Reporting	N/A	U	S
Is there an Incident reporting process in place?			✓
Is there a near miss/incident reporting form which includes follow-up?			✓
Are incidents reported and was the problem fixed the last time there was a near miss or incident?			✓
Are management and workers involved in solving the issues?		✓	
Comments: INCIDENT COMMENT			

Communication/Training	N/A	U	S
Have you received a safety orientation (When and what)			✓
Are safety meetings held within the (prescribed) frequency			✓
Is the appropriate training in place			✓
First aid training			✓
H2S training			✓

WHMIS training			✓
TDG training			✓
Ground disturbance training			✓
eGSO/ CSO training		✓	
Job Specific training (List any that apply)		✓	
Comments:			

Personal Protective Equipment	N/A	U	S
Is the appropriate PPE available and being used			✓
Hard Hat			✓
Safety Glasses			✓
Footwear			
Protective clothing (FR coveralls, gloves, etc)			
Hearing protection			
Respiratory protection (Appropriate for the hazard)			
Personal gas monitor			
Communication equipment			
Other equipment (please specify)			
Comments:			

Safety Equipment	N/A	U	S
Is the appropriate safety equipment available and being used			
Fire Fighting equipment (inspected, tagged, accessible, good condition)			
Rotating equipment guards			
First Aid Kit			
Fall Arrest equipment (Ladders, steps, harness, lanyards, etc.)			
Emergency Shut down and Alarm Systems (positive air shutoffs, backup alarms, etc.)			
Other (Specify)			
Comments:			

Notes

Description	Details
InspectionFrequency: Are equipment and vehicles inspected, and at what frequency?	GOOD HAZARD TEST
SafetyOrientation: Have you received a safety orientation (When and what)	GOOD TRAINNING TEST

Discrepancies

Description	Details
Are there written emergency plans available and communicated to personnel on the work site?	BAD RULES TEST
Are management and workers involved in solving the issues?	BAD INCIDENT TEST
Communication & Training	BAD TRAINING TEST

Corrective Actions

Description	Details	Date Requested	Date Completed	Person Responsible
Are equipment and vehicles inspected, and at what frequency?	HAZARD COR ACT	2022-07-23		Form Loco
Is there a system for hazard assessment, reporting and follow-up?	HAZARD COR ACT TEST	2022-07-23		Form Loco
Are there written emergency plans available and communicated to personnel on the work site?	RULES COR ACT TEST321	2022-07-23		Form Loco
Are management and workers involved in solving the issues?	INCIDENT COR ACT	2022-07-23		Form Loco
Communication & Training	TRAINING COR ACT	2022-07-23		Form Loco

Conducted by Signature: Form Loco

Date Signed: To be determined

Messages

to: Alvin

date: 7/23/2022

2: 27: 24 PM

from: Form Loco

message: Spot Check Safety completed for COMPANYNAME
CALGARY