

- ☐ Is everyone accounted for, fit for work, alert and ready to start work?
- ☐ Any additional information the team require to complete a safe shift?
- ☐ Are there any concerns that have been handed over from the previous shift that may impact the team's safety?
- ☐ Are there any HSE Notifications and/or Sime Darby Notification from other business units to discuss?
- ☐ Are adequate controls in place to prevent this type of incident occurring in the work area?
- ☐ Are there any safety, company or branch notices to be discussed?
- ☐ Which work groups are working on shift?
- ☐ Does everyone know what our goals and targets are for this shift?
- ☐ Are there any questions?

- ☐ Any incidents that happened or hazards identified during the last shift?
- ☐ Are there any work place change of conditions that need to be discussed?
- ☐ What task(s) are people doing this shift?
- ☐ As a team select a safety focus area for the day
- ☐ Measure the work group's safety performance for the last shift and add notes for shift handover
- ☐ Are there any questions?
- ☐ Complete Right to Start Team activity for the day

- M** ☐ Review a message in the toolbox pack.
- T** ☐ Review CI Board and provide updates.
- W** ☐ Review a Risk from the Risk Register.
- T** ☐ Review any incident reports.
- F** ☐ Review a company safety process.
- S** ☐ Confirm emergency response team.
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What was the agreed safety performance for the last shift? Tick the team's decision below. List in notes what you plan to do to maintain or improve.

GREEN SHIFT **G** 

A safe day, with team members being proactive and making changes to improve safety within their team.

AMBER SHIFT A

A safe day, no improvements and initiatives employed by the team.

RED SHIFT R

A near miss, unsafe act injury, illness, damage to plant and or environment etc occurred.

Date: Start Time:

Shift: _____

Supervisor

First Aider(s): _____

Warden(s)

Visitor(s): _____

Attendance: _____ out of _____

Safety focus:

[illegible]