Recognize
Eliminate
Discuss

I AM RESPONSIBLE FOR SAFETY!
ONE DAY AT A TIME!
SUPERVISOR’S COMMITMENT TO SAFETY

I WILL...

- WORK EACH DAY WITHOUT AN ACCIDENT
- NEVER WALK PAST AN UNSAFE ACT WITHOUT STOPPING TO CORRECT IT
- HAVE A POSITIVE ATTITUDE TOWARDS SAFETY
- ACCEPT ACCOUNTABILITY FOR MY ACTIONS AND THOSE WHOM I SUPERVISE
- STOP THE CREW WHEN THERE ARE CHANGES TO THE OPERATION
- PARTICIPATE IN THE INDOCTRINATION OF NEW EMPLOYEES TO MY OPERATIONS
- PARTICIPATE IN ALL TRAINING AND WORK TO TRAIN ALL OF MY SUBORDINATES
- ENSURE THAT EACH OPERATION FOR WHICH I AM RESPONSIBLE HAS A CURRENT HAZARD ANALYSIS AND WORK PLAN

WHO IS RESPONSIBLE FOR SAFETY

I AM!
Check off the hazards that apply to this job. List the item # in the 2nd column (other side). Identify the plans to eliminate or control them in the 3rd column (other side).

### Field Level Hazard Assessment

#### Environmental Hazards
1. Work area clean
2. Material storage identified
3. Dust / Mist / Fume
4. Noise in area
5. Extreme temperatures
6. Spill potential
7. Waste properly disposed
8. Excavation permit required
9. Other workers in area. BMP’s in place.
10. Weather conditions
11. MSDS reviewed

#### Ergonomic Hazards
12. Awkward body position/posture
13. Stretch and Flex performed
14. Lift too heavy / Awkward to lift
15. Working above your head

#### Access / Egress Hazards
16. Aerial lift / Man basket
17. Scaffold (inspected & tagged)
18. Ladders (tied off)
19. Slips / Trips / Falls
20. Evacuation (alarms, routes, ph. #)
21. Confined space entry permit required

#### Fall/Overhead Hazards
22. Barricades & Signs in place
23. Hole coverings identified
24. Harness / Lanyard inspected
25. 100% Tie-off w/harness
26. Tie off points identified
27. Falling items
28. Foreign bodies in eyes
29. Hoisting or moving loads overhead

#### Rigging & Hoisting Hazards
30. Proper tools used
31. Tools inspected
32. Equipment inspected
33. Slings inspected
34. Others working overhead / below
35. Critical lift plan req.
36. Qualified Rigger / Signal Person
37. Known weight of load

#### Electrical Hazards
38. GFCI test
39. Working on/near energized equipment
40. Electrical cords condition
41. Electrical tools condition
42. Fire extinguisher
43. Hot work permit required
44. Voltage/Approach Distance/Boundary Known Arc Flash Hazard
45. Panel/Box Labeled Lock Out
46. Tag Out Verified/Used Qualified Electrician involved Check for dead/Verify de-energized

#### Personal Limitations / Hazards
47. Procedure not available for task
48. Confusing instructions
49. No training for task or tools to be used
50. First time performing the task
51. Daily stretch & flex performed
52. Report all injuries to your supervisor

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NOTES:
ACTIVITY HAZARD ANALYSIS

DATE: ________________________ JOB #: ________________________

TASKS/JOB STEPS: (Climbing, Lifting, Bolting, Rigging, Forming, Op. Heavy Equip., Pulling, Drilling, etc.)
1. _______________________________________________________
2. _______________________________________________________
3. _______________________________________________________
4. _______________________________________________________
5. _______________________________________________________

HAZARDS (slips, trips, falls, electrocution, struck by or caught between, overexertion/heavy loads/material handling, inhalation, chemicals, hazardous materials, high noise, dust):
1. _______________________________________________________
2. _______________________________________________________
3. _______________________________________________________
4. _______________________________________________________
5. _______________________________________________________

CONTROLS (Engineering, Administrative or PPE, Mechanical Means of Lifting/Forklift/Rigging, Vacuum, Water, Distance, Shield, etc.):
1. _______________________________________________________
2. _______________________________________________________
3. _______________________________________________________
4. _______________________________________________________
5. _______________________________________________________

Foreman / Supervisor Signature

___________________________________________________________________

Crew Signatures

___________________________________________________________________
___________________________________________________________________
___________________________________________________________________
___________________________________________________________________
___________________________________________________________________
COMMITMENT TO SAFETY

For my family, my friends, my co-worker, and for myself....

• I will speak up and take action when something is not right.
• I will make sure no one gets hurt on my shift.
• I will make extreme housekeeping happen.
• I will look after the person beside me.
• I will ask if I do not know.
• I will follow the plan.
• I will communicate hazards to my crew members.
• I will update the hazard analysis when conditions change.
• I will have a hazard analysis before I start.
• I will follow the rules and never take a shortcut.
• I will fix it if it is wrong.
• I will never walk past an unsafe act.
• I will make the safety of myself and my co-workers my #1 priority.

COMMITMENT TO SAFETY...