

SAFETY PREVENTION OBSERVATION

INDUSTRIAL REPORT

DATE:

THIS SAFETY PREVENTION OBSERVATION REPORT CAN BE CONDUCTED USING THE FOLLOWING DEVICES:

- TABLET (ANDROID & IOS)
- SMARTPHONE (ANDROID & IOS)
- AR GLASSES (MICROSOFT HOLOLENS 2, EPSON, REALWEAR AND VUZIX GLASSES)

FACILITY:

SITE/SECTION:

OBSERVER NAME:

OBSERVED NAME:

OBSERVED JOB TITLE:

OBSERVATION FOCUS:

OBSERVATION START TIME:

OBSERVATION POINTS CHECKLIST

| CLEANLINESS AND ENVIRONMENT | YES | NO |
|--|-----|----|
| Are floors and walkways clear of obstacles and trip hazards? | | |
| Are tools and equipment stored correctly when not in use? | | |
| Is there adequate lighting in work areas? | | |
| Emergency signs exist and evacuation routes are clear? | | |

| PERSONAL PROTECTIVE EQUIPMENT (PPE) | YES | NO |
|---|-----|----|
| Are employees wearing appropriate PPE for their tasks? | | |
| Is the PPE in good condition and does it fit correctly? | | |

| EQUIPMENT AND MACHINERY | YES | NO |
|---|-----|----|
| Is the equipment properly maintained and regularly inspected? | | |
| Are guards and safety devices in place and working? | | |
| Are the lockout/tagout procedures followed when servicing the machines? | | |

| WORK PRACTICES | YES | NO |
|---|-----|----|
| Are employees following proper ergonomic guidelines? | | |
| Are safe lifting techniques being used? | | |
| Are proper body mechanics observed during manual tasks? | | |

| TRAINING AND AWARENESS | YES | NO |
|--|-----|----|
| Are employees following proper ergonomic guidelines? | | |
| Are new employees properly orientated to safety protocols? | | |

| EMERGENCY PREPAREDNESS | YES | NO |
|---|-----|----|
| Fire extinguishers and safety equipment are in their designated locations? | | |
| Are emergency exits and escape routes clearly marked? | | |
| Are employees aware of the emergency procedures and do they know the evacuation routes? | | |

OTHER RELEVANT COMMENTS

| ADDITIONAL COMMENTS |
|---------------------|
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OBSERVATION END TIME:

ACTIONS TAKEN

LIST ANY IMMEDIATE CORRECTIVE ACTIONS TAKEN DURING THE OBSERVATION.

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SUGGESTED ACTIONS

LIST OF ANY FOLLOW-UP ACTIONS RECOMMENDED.

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SIGNATURE: