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| --- | --- | --- | --- | --- |
| **Ranch/Farm Name:** | | | | |
| **Date:** | **AgSafe Consultant:** | | | |
| **Phone Number:** | **Email:** | | | |
| **Actionable Item** | **Date Assigned** | **Complete By** | **Date Completed** | **Person Responsible** |
| **Written safety policy which identifies the employer’s goals and the responsibilities of all personnel:**   * Policy statement * Communication policy * Policy re: Regulastions & access to them |  |  |  |  |
| **Safety instruction for hazardous tasks:**   * Safe work practices developed & written * Safe work practices communicated * Risk assessments done for all tasks |  |  |  |  |
| **Emergency procedures developed, and workers trained:**   * Emergency call sheet * Emergency procedures training communication document * Emergency response plan * Notes from emergency drill |  |  |  |  |
| **First aid services & record keeping:**   * First aid assessment done for all sites * First aid information signage * First aid logbooks |  |  |  |  |
| **Worker training & education in specific tasks, hazards and practices:**   * Formal orientation and training procedures outline * Health & safety disciplinary policy created & communicated * Informal orientation and training procedures outline * Required training listed and identified/ communicated * Record of training (creation of form) * Training communication policy created and posted * Worker orientation checklist created and used * Tailgate or tool box talks occurring and recorded |  |  |  |  |

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| **Actionable Item** | **Date Assigned** | **Needs to be Completed by** | **Complete** | **Person Responsible** |
| **Orientation:**   * Work tasks * Emergency Procedures * Contractors |  |  |  |  |
| **Worker Certification:**   * Certificates where required |  |  |  |  |
| **Hazard Identification:**   * Hazards known, listed and identified to workers |  |  |  |  |
| **Hazard Controls:**   * Controls implemented and communicated |  |  |  |  |
| **Personal Protective Equipment:**   * Program in place * Items required provided and training for use in place |  |  |  |  |
| **Inspections:**   * Inspections occurring and documented * Training in place for inspection team * Unsafe conditions noted and corrected |  |  |  |  |
| **Investigations:**   * Incidents and accidents investigated promptly * Training for investigators |  |  |  |  |
| **Administration:**   * Records & statistics are kept for all incidents & accidents * Staff are aware of the health & safety program & how to bring concerns to the appropriate people |  |  |  |  |
| **Action planning:**   * Action plan to form utilized and ongoing plans for improvement documented |  |  |  |  |