

**ONLY RECORD WHAT YOU ACTUALLY OBSERVE**

**Task** (What was being done):

**Hazard** (What the EE was exposed to):

**Unsafe Behavior** (What the EE was doing):

**Why** (Reason EE was behaving this way):

**AGREEMENT: YES OR NO** (circle one)

**Solution:**

**COMMITMENT: YES OR NO** (circle one)

**Comments:**

**OBSERVATION CRITIQUE**

**DID THE OBSERVER:**

1. *Notify you before performing an observation?*

YES or NO

2. *Point out the good things you were doing first?*

YES or NO

3. *Review any unsafe behaviors with you?*

YES or NO



**AMERISURE™**



**AMERISURE'S OBSERVATIONAL SAFETY PROGRAM**

**GENERAL**

**FALL PROTECTION**

The purpose of this program is to improve work conditions, and is not designed as a tool for disciplinary action. As a result, names of observed employees are not recorded or disclosed.

This material is for informational purposes only and is not intended to provide specific solutions for any potentially unsafe conditions. Amerisure assumes no duty or obligation to any party in providing this information.



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## OBSERVATIONAL CHECKLIST FOCUSED FALL OBSERVATIONS

Directions: Observe only 1-2 employees at a time. Mark both observed and unobserved behaviors or conditions with Yes, No, or Not Applicable. If No, choose the most applicable Hazard # that corresponds with the observed condition or behavior. Common hazards that exist in these unsafe conditions have been noted below each item.

### POTENTIAL HAZARDS RESULTING FROM BEHAVIORS AND/OR CONDITIONS CREATED AND/OR ALLOWED BY EMPLOYEE/EQUIPMENT:

1. Fall – From Elevation
2. Fall – Anchor System Failure
3. Struck By – Falling/Swinging after Fall
4. Fall – Improper Setup PFAS
5. Fall – Improper Care of PFAS
6. Fall – Failure to Account for Changing Conditions of the Job
7. Fall – Guardrail Failure
8. Fall – Falling Over Guardrail
9. Fall – Distracted Safety Monitor
10. Fall – Through Floor Opening or Failure of Floor Opening Controls
11. Fall – Improper Covering of Floor Opening

### OBSERVED BEHAVIORS & CONDITIONS: PERSONAL FALL ARREST SYSTEMS

	Y	N	N/A	HAZARD #
Personal fall arrest system when working on unprotected surfaces over 6' high (1)				
Lanyard is properly anchored, connected to a rope grab, horizontal or vertical life line (1, 4)				
Connection points rated at 5,000 lbs (2)				
Harnesses, lanyards and connection points inspected daily and in proper condition (1, 5)				
Anchor points are above the employee's head and set in a way that minimizes swing hazards (1, 3, 6)				
Employee moves from one station to another without exposure to falls (1)				
Retractable lifelines have been inspected prior to use (1, 5)				
Free fall distance has been analyzed, prior to the fall being arrested, to ensure the employee will not strike a lower level upon fall (1, 4)				

### OBSERVED BEHAVIORS & CONDITIONS: SAFETY MONITOR

	Y	N	N/A	HAZARD #
Safety monitor is trained on hazard recognition and potential falls (9)				
Safety monitor is not distracted (cell phone, radio or other device) (9)				

### OBSERVED BEHAVIORS & CONDITIONS: GUARDRAILS

	Y	N	N/A	HAZARD #
Work area has guardrails in place at leading edges, wall openings, stairwells, and changes in elevation (1)				
Accounted for changes in fall exposure (working from stilts, ladders or other elevated means near guardrails) (6)				
Guardrails are rated to withstand 200lbs of outward and downward force with the top rail between 39 and 45 inches above the working surface (7, 8)				

### OBSERVED BEHAVIORS & CONDITIONS: FLOOR OPENINGS

	Y	N	N/A	HAZARD #
Floor openings are securely covered and marked with 'hole' (10)				
Floor opening covers are rated at 2x the max intended load of employees, tools, equipment (10)				
Larger floor openings are guarded with a guardrail system (11)				
Floor openings used for access and egress are properly guarded (1, 7, 10)				

### IF MORE THAN TWO UNSAFE CONDITIONS AND/OR BEHAVIORS ARE OBSERVED:

1. Stop the Observation
2. Remove/Correct Hazards
3. Note in Comment Area

### OBSERVATION DATA SHEET

Company Name: \_\_\_\_\_

Location of Observation: \_\_\_\_\_

Date of Observation: \_\_\_\_\_

Name of Observer: \_\_\_\_\_

Number of Individuals Observed: \_\_\_\_\_