SAFETY & HEALTH PROGRAM ASSESSMENT

I. Management Leadership and Employee Involvement

Criteria	1	2	3	4	5	Rating
A Clear Worksite Safety and Health Policy	We have no S&H policy.	We have a written (or oral, where appropriate) S&H policy.	We have an S&H policy, and some employees can explain it.	We have an S&H policy, and the majority of employees can explain it.	We have an S&H policy, and all employees accept, can explain, and fully understand it.	
B Clear Goals and Objectives Are Set and Communicated	We have no S&H goals and objectives.	We have written (or oral, where appropriate) S&H goals and objectives.	Some employees can explain S&H results and measures for achieving them.	The majority of employees can explain S&H results and measures for achieving them.	All employees are involved in developing S&H goals and can explain desired results and how results are measured.	
C-1 Management Leadership	Safety and health is not a top management value or concern.	Some evidence exists that top management is committed to safety and health.	Some employees can give examples of management's commitment to safety and health.	The majority of employees can give examples of management's active commitment to safety and health.	All employees can give examples of management's commitment to safety and health.	
C-2 Management Example	Managers do not follow basic safety and health rules.	Managers generally follow basic safety and health rules.	Managers follow the rules and occasionally address the safety behavior of others.	Managers follow the rules and usually address the safety behavior of others.	All employees recognize that managers in this company always follow the rules and address the safety behavior of others.	

I. Management Leadership and Employee Involvement

Criteria	1	2	3	4	5	Rating
D Employee Involvement	Employee involvement in safety and health issues is neither encouraged nor rewarded.	Employees generally feel that their input on safety and health will be considered by supervisors.	Some employees feel that they have a positive impact on safety and health.	The majority of employees feel they have a positive impact on identifying and resolving safety and health issues.	All employees have ownership of, and can explain their role in, safety and health.	
E Assigned Safety and Health Responsibilities	Specific safety and health responsibilities and performance expectations are generally unknown or hard to find.	Performance expectations are generally spelled out for all employees.	Some employees can explain what is expected of them.	The majority of employees can explain what is expected of them.	All employees can explain what is expected of them, in terms of safety and health-related performance.	
F Authority and Resources for Safety and Health	All S&H authority and resources reside with supervisors and are not delegated.	S&H authority and resources exist, but most are controlled by supervisors.	S&H authority and resources are spelled out for everyone, but there is often a reluctance to use them.	The majority of employees believe they have the necessary authority and resources to meet their S&H responsibilities.	All employees believe they have the necessary authority and resources to meet their S&H responsibilities.	
G Accountability	There is no effort toward accountability.	There is some accountability, but it is generally hit or miss.	Employees are generally held accountable for S&H, but reprimands and rewards do not always follow performance.	Accountability systems are in place, but employees are only reprimanded for negative performance.	Employees are held accountable for S&H and all performance is addressed, with rewards and reprimands handed out appropriately.	
H Program Review (Quality Assurance)	There is no program review process.	Changes in programs are driven by events such as accidents or near-misses.	A program review is conducted, but it doesn't drive all necessary program changes.	A comprehensive review is conducted at least annually and drives appropriate program modifications.	In addition to a comprehensive review, a process is used to drive continuous correction.	

Subtotal: _____

II. Workplace Analysis

Criteria	1	2	3	4	5	Rating
A-1 Hazard Identification (Expert Survey)	No comprehensive surveys have been conducted.	Expert surveys are conducted in response to accidents, complaints, or compliance activity only.	Comprehensive expert surveys are conducted, but corrective action sometimes lags.	Comprehensive expert surveys are conducted periodically and drive appropriate corrective action.	Comprehensive expert surveys are conducted regularly and result in corrective action and updated hazard inventories.	
A-2 Hazard Identification (Change Analysis)	No system for hazard review of planned or new facilities exists.	Hazard reviews of planned or new facilities, processes, materials, or equipment are problem driven only.	A planned or new facility, process, material, or equipment that poses a high hazard risk is reviewed.	Every planned or new facility, process, material, or equipment is fully reviewed by a competent team.	Every planned or new facility, process, material, or equipment is fully reviewed by a competent team, along with affected workers.	
A-3 Hazard Identification (Job and Process Analysis)	There is no routine hazard analysis system in place.	A hazard analysis program exists, but few are aware of it.	A current hazard analysis exists for all jobs, processes, or phases and is understood by many employees.	A current hazard analysis exists for all jobs, processes, and material and it is understood by all employees.	A current hazard analysis exists for all jobs, processes, and material; it is understood by all employees; and employees have had input into the analysis for their jobs.	
A-4 Hazard Identification (Inspection)	There is no routine inspection program in place and many hazards can be found.	An inspection program exists, but corrective action is not complete; hazards remain uncorrected.	Inspections are conducted and most items are corrected, but some hazards remain uncorrected.	Inspections are conducted and all items are corrected; repeat hazards are seldom found.	Employees and supervisors are trained, conduct routine joint inspections, and all items are corrected.	

II. Workplace Analysis

Criteria	1	2	3	4	5	Rating
B Hazard Reporting System	There is no hazard reporting system and/or employees are not comfortable reporting hazards.	A system exists for hazard reporting but employees find it unresponsive or are unclear on how to use it.	A system exists for hazard reporting and employees feel they can use it, but the system is slow to respond.	A system exists for hazard reporting and employees feel comfortable using it.	A system exists for hazard reporting; employees feel comfortable using it and correcting hazards on their own initiative.	
C Accident/ Incident Investigation	Injuries are either not investigated or investigation is limited to report writing required for compliance.	Some investigation of incidents takes place, but root cause is seldom identified and correction is spotty.	OSHA-reportable incidents are generally investigated; accident cause and/or correction may be inadequate.	All OSHA-reportable incidents are investigated and effective prevention is implemented.	All loss-producing incidents and near-misses are investigated for root cause with effective prevention.	
D Injury/Illnesses Analysis	Little or no effort is made to analyze data for trends, causes and prevention.	Data are centrally collected and analyzed but not widely communicated for prevention.	Data are centrally collected and analyzed and common causes are communicated to supervisors.	Data trends are fully analyzed and displayed, common causes are communicated and management ensures prevention.	Data trends are fully analyzed and displayed, common incident causes are communicated and management ensures prevention; employees are fully aware of trends, causes and means of prevention.	

Subtotal: _____

III. Hazard Prevention and Control

Criteria	1	2	3	4	5	Rating
A Timely and Effective Hazard Control	Hazard control is not complete, effective, or appropriate.	Hazard controls are generally in place, but there is heavy reliance on personal protective equipment.	Hazard controls are fully in place, but there is some reliance on personal protective equipment.	Hazard controls are fully in place with priority given to engineering controls, safe work procedures, administrative controls, and personal protective equipment (in that order).	Hazard controls are fully in place, known to and supported by workforce, with concentration on engineering controls and safe work procedures.	
B Facility and Equipment Maintenance	There is little or no attention paid to preventive maintenance; breakdown maintenance is the rule.	A preventive maintenance schedule is in place but is often allowed to slide.	A preventive maintenance schedule is in place and is usually followed, except for higher priorities.	An effective preventive maintenance schedule is in place and applicable to all equipment.	Operators are trained to recognize maintenance needs and perform and order maintenance on schedule.	
C-1 Emergency Planning and Preparation	Little effort is made to prepare for emergencies.	There is an effective emergency response plan, but training and drills are weak, and roles may be unclear.	There is an effective emergency response plan and team, but other employees may be uncertain of their responsibilities.	There is an effective emergency response plan and employees have a good understanding of responsibilities, because of plans, training, and drills.	There is an effective emergency response plan and employees know how to respond immediately, because of effective planning, training, and drills.	
C-2 Emergency Equipment	There is little or no effort made to provide emergency equipment and information.	Emergency phones, directions and equipment are in place, but employees show little awareness.	Emergency phones, directions and equipment are in place, but only emergency teams know what to do.	Facility is well-equipped for emergencies, with appropriate emergency phones and directions; majority of personnel know how to use equipment and communicate during emergencies.	Facility is fully equipped for emergencies; all systems and equipment are in place and regularly tested; all personnel know how to use equipment and communicate during emergencies.	

III. Hazard Prevention and Control

Criteria	1	2	3	4	5	Rating
D-1 Medical Program (Health Providers)	Occupational health assistance is rarely requested or provided.	Occupational health providers are available, but normally concentrate on employees who get hurt.	Occupational health providers are consulted about significant health concerns in addition to accidents.	Occupational health providers are involved in hazard assessment and training.	Occupational health providers are regularly onsite and fully involved in hazard assessment and training.	
D-2 Medical Program (Emergency Care)	Neither onsite nor community aid can be ensured at all times.	Personnel with basic first aid skills are usually available, with community assistance nearby.	Either onsite or nearby community aid is always available on day shift.	Personnel with basic first aid skills are available onsite, during all shifts.	Personnel fully trained in emergency medicine are available onsite during all shifts.	

Subtotal: _____

IV. Safety and Health Training

Criteria	1	2	3	4	5	Rating
A Employees Learn Hazards (How to Protect Themselves and Others)	Facility depends on experience and informal peer training to meet needs.	Training is provided when the need is apparent; experienced employees are assumed to know the material.	Facility provides legally required training and makes effort to include all employees.	Facility is committed to high-quality employee hazard training, ensures all personnel participate, and provides regular updates.	Facility is committed to high-quality employee hazard training, ensures all personnel participate, and provides regular updates; in addition, employees can demonstrate proficiency in, and support of, all areas covered by training.	
B-1 Supervisors Learn Responsibilities and Underlying Reasons	There is no formal effort to train supervisors in safety and health responsibilities.	Supervisors make responsible efforts to meet safety and health responsibilities but have limited training.	Supervisors have received basic training, appear to understand and demonstrate importance of worksite hazard analysis, physical protections, training reinforcement, discipline, and knowledge of work procedures.	Most supervisors assist in worksite hazard analysis, ensure physical protections, reinforce training, enforce discipline, and can explain work procedures based on the training provided to them.	All supervisors assist in worksite hazard analysis, ensure physical protections, reinforce training, enforce discipline, and can explain work procedures based on the training provided to them.	
B-2 Managers Learn Safety and Health Program Management	Managers generally show little understanding of their safety and health management responsibilities.	Managers are generally able to describe their safety and health roles, but often have trouble modeling them.	Managers generally show a good understanding of their safety and health roles and usually model them.	All managers follow, and can explain, their roles in safety and health program management.	All managers have received formal training in safety and health management responsibilities.	

Subtotal: _____

Grand Total: _____