Worker Assessment Checklist-Heavy Equipment Operator

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| **Worker Name** *(first & last)***:** |  | **Date of Assessment:** |
| **Worker Occupation:** |  | [ ]  | **New Worker**  |
| [ ]  | **Young Worker** |
| [ ]  | **Observation** |
| [ ]  | **Monthly Assessment** |
| **Activity being assessed:** |  |  |
| **Company Policies & Procedures** | **Check if Safe** | **Include comments both positive and when improvement is needed.** |
| **Emergency Response Plan (ERP)** |
| Can locate ERP | [ ]  |  |
| Knows personal location on map | [ ]  |  |
| Can locate muster point and ETV | [ ]  |  |
| Can identify 1st Aid attendant(s)  | [ ]  |  |
| Has appropriate 1st Aid equipment | [ ]  |  |
| Has appropriate fire tools and extinguishers | [ ]  |  |
| Understands right to refuse unsafe work and what to do when unplanned issues come up | [ ]  |  |
| **Before “Clear to Approach” Signal Given** |
| Radio contact, stops work & makes eye contact | [ ]  |  |
| Stops all moving parts or tools | [ ]  |  |
| Lowers blade / boom / head / saw | [ ]  |  |
| Performs all lockout required | [ ]  |  |
| Gives “clear to approach” signal | [ ]  |  |

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| **Safe Work Procedures for Task** |
| Can identify worksite hazards | [ ]  |  |
| Can describe how hazards are eliminated, controlled or managed. | [ ]  |  |
| Is alert and focused on job | [ ]  |  |
| Demonstrates safe use of tools & equipment | [ ]  |  |
| Demonstrates Lock-out procedures | [ ]  |  |
| Uses 3 point mount / dismount | [ ]  |  |
| Has completed pre work checks on tools and equipment. | [ ]  |  |
| Wears seat belt when operating equipment (including vehicles) | [ ]  |  |
| Follows work instructions | [ ]  |  |
| **Personal Protective Equipment (PPE)** |
| Hard hat of required colour | [ ]  |  |
| Uses appropriate eye / face protection | [ ]  |  |
| Uses required hearing protection | [ ]  |  |
| Wears high visibility / protective clothing | [ ]  |  |
| Wears appropriate footwear for job | [ ]  |  |
| **Company Evaluation Score: 1 2 3**  |
| Quality of Work and Production |  |  |
| Understands Work Plans |  |  |
| Work Ethic and Consistency |  |  |
| Teamwork and Cooperation |  |  |
| Punctuality |  |  |
| Safety Meeting Involvement |  |  |
| Care of Company Equipment |  |  |
| Cleanliness of Machine Cab and Pick-up |  |  |
| Daily Servicing |  |  |
| Overall Safety Attitude |  |  |
| **1=Poor 2=Average 3=Excellent Total score: /30****Follow up required:** |
| [ ]  Worker is competent to perform assigned duties under normal supervision. |
|  |  |
| **Signature of Employee / Contractor** | **Name & Signature of Supervisor / Trainer** |