



Health Safety Environment Evaluation

CF-S-50

Business Unit:	Location (LSD/NTS):
Evaluator:	Date:
Client:	
Supervisor/Foreman:	Crew size:
Manager /Superintendent	Contractors (List):
Scope of Work:	

Scoring: UA – Unacceptable, **NI** – Needs Improvement, **A** – Acceptable, **PF** – Positive Findings

Assessment Checklist		Score	Corrective Action / Comments
1.	Is the BU Manager involved in on-site activities and ensuring deficiencies corrected?		
2.	Are workers aware of their activities/tasks & associated hazard sources?		
3.	Do all workers have valid training for the task(s) being completed?		
4.	How did they prepare before coming to the work site (Equipment Inspections/Certifications)?		
5.	How effective are the tailgate and/ or safety meetings & documentation?		
6.	Do workers know requirements for Emergency Response – can they describe their role?		
7.	Are Hazard Assessments being completed effectively?		
8.	How are conflicting activities and operations managed/organized/controlled?		
9.	How are changes in the scope of work/activities/conditions being managed /controlled and communicated?		
10.	Are safe work practices/critical procedures for the activities/tasks implemented to Strike standards? Are our contractors adhering to their or Strike standards?		
11.	Do we identify, prevent and address impairment (A&D, fatigue, etc...) at the work site to meet Strike expectations?		
12.	Is the Supervisor/Foreman meeting Strike's stated/reviewed expectations?		
13.	Are potential environmental risks identified and controlled?		
14.	Are hazardous products identified and are they being managed?		
15.	How is the site being managed?		
16.	Are the supervisor and crews knowledgeable of incident reporting procedures?		
17.	Do workers understand PPE requirements associated with specific tasks?		



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CF-S-50

Assessment Checklist		Score	Corrective Action / Comments
18.	Are atmospheric hazards being monitored and controlled?		
TOTAL SCORE			

Scoring: **UA** – Unacceptable, **NI** – Needs Improvement, **A** – Acceptable, **PF** – Positive Findings

Sign off			
Strike Foreman:			
	Signature	Position	Date
Strike BU Manager:			
	Signature	Position	Date
Strike Evaluator :			
	Signature	Position	Date

Notes

This Health Safety (HSE) Evaluation should be conducted by Strike Executive and or Senior Manager in conjunction with the site Foreman/Supervisor. The intent is to evaluate the effectiveness of our HSE Systems and engage the leaders and employees at the workplace. Overall this is about improving our work site HSE performance through alignment with Strike Values and Expectations. The HS&E Evaluation is an opportunity for our leaders to observe measure and provide feedback on our on-site performance. Any corrective actions/comments resulting from the evaluation is to be discussed with the Business Unit management to address as improvement opportunities.

The HS&E Evaluation should involve interviewing the Strike Supervisor/Foreman, and then a confirmation process of reviewing documentation, observing the vendor's personnel conducting the task or project and asking follow up questions. The intention is to obtain a "snap shot" of the application of our HSE so as to confirm effectiveness and ensure safety while completing work on our worksites.

Evaluations should be scheduled and communicated prior to any evaluation being completed and should be planned to reflect the risk associated with the work and or project (this is especially important during critical tasks and sections of work that required focus by the Strike Supervisor/ Foreman).

Potential follow up questions to the initial HSE Evaluation questions:

1. Is the BU manager involved in on-site activities and ensuring deficiencies corrected? - Has there been a safety inspection from a Management Representative (Mgr, HSE Advisor, and Superintendent)? - What was the outcome/follow up? - Does the company provide Corporate HSE direction (Bulletins, Alerts, Directives) & how does that relate to direction on the work site?	2. Are the workers aware of their activities/tasks & associated hazards? - Do they have knowledge of site specific requirements, & hazards? - Do they know what the hazard sources are? - Do they have the appropriate training based on the hazards (Ground Disturbance, Fall protection, etc...)?	3. Do all workers have valid training for the task(s) being completed? - What training is required and is it considered relevant by the supervisor? - What orientation do they have (Strike, CSTS, eLearning, IRP 16) - Has a Site Specific orientation been conducted? - Are required qualifications current and competencies assessed?	4. How did they prepare before coming to the work site (Equipment Inspections / Certifications)? - Are equipment inspections available? - Did they check for Inspection / certifications from contractors or from provided contracted services? - Did the clients check Inspection appropriate certifications for rigs, cranes etc...?
5. How effective are the tailgate and or safety meetings & documentation? - Do they talk about the day's activities/tasks about hazards & controls? - Do they talk about coordinating work? - Are the meetings tell meetings or is there discussion (are workers engaged)? - Do they track actions in minutes & reference completion of actions in following minutes?	6. Do the workers know our requirements for Emergency Response – can they describe their role? - What are they expected to do in an emergency? - Who do they notify at Strike and or client? - When do they notify Strike? - Do they have the capability to meet our ER requirements?	7. Are Hazard Assessments being completed effectively? - Are THA conducted before the task is started? - Are THA applicable to the activities/tasks assigned & aligned with the SWA or permit? - Are the hazards & controls aligned with the Safe work permit? - Is the crew conducting participating or is the Foreman filling forms? - Where are the assessments being completed and are they communicated effectively?	8. How are conflicting activities and operations managed / organized / controlled ? - What is the communication process between crews, contractors? - How well is the communication process working? - How are they identifying & controlling hazards from outside of their activities/tasks? - Are Strike supervisors / foreman engaging client site representatives?

9. How are the changes in the scope of work /activities / conditions being managed /controlled and communicated? • How do they identify new hazards due to changes, and control them? • When a change occurs do they stop work and re-assess hazards? • Do they review the THA/JSA and formally update the document?	10. Are safe work practices/procedures for the activities / tasks implemented to Strike standards? Are our contractors adhering to their and /or Strike standards? • Have they identified critical procedures such as: Lockout Tagout, Ground Disturbance, Confined Space Entry? • Do they reference our procedures or do they use our client's procedures? • How are the Safe Work Procedures /Safe Work Practices implemented?	11. Do we identify prevent, and address impairment (A&D, fatigue, etc...) at the work site – do they meet Strike expectations? • How are they meeting the Strike A&D Policy? • How do they manage Fatigue Management? • What day of the rotation are you on? • Are our crews getting the required rest/sleep? • Is the journey home planned as part of the schedule? • Are the crews aware of the employee assistance program?	12. Are the Supervisor/ Foreman meeting Strike stated/reviewed expectations? • Have they engaged their crews? • Are they communication with client representatives? • Are the expectations set out in the pre-project and or tailgate meeting? • Do the crew meet reporting requirements? • Does the supervisor demonstrate his leadership and visibility on the workplace?
13. Are potential Environmental risks identified and controlled? • Are hazardous products contained and controlled • Is there adequate spill response equipment on-site? • Is waste being managed and disposed of properly? • Is vehicle and equipment idling controlled? • Are proper fuelling procedures in place (gas / diesel / propane)? • Are loads secured (TDG)	14. Are hazardous products identified and are they being managed? • Are MSDS available and Current? • Are hazards reviewed with all workers • Is MSDS binders being utilized • Are products being reviewed as part of the hazard assessment? • Are hazardous products identified?	15. How is the site being managed? • Are vehicles being controlled and parked for egress? • Is housekeeping adequate? • Are adequate sanitation facilities available • Is the required signage available? • Is site access controlled? • Is fire protection sufficient for project / task?	16. Are the supervisor and crews knowledgeable of incident reporting procedures? • Do crews know what is reportable and to who and when? • Is Right to Refuse considered as a reportable event?
17. Do workers understand PPE requirements associated with specific tasks? • Basic Strike requirements? • Respiratory protection • Fall protection? • Confined space entry / SCBA/SABA? • Hearing protection/ • Eye and face protection? • Are crews demonstrating care and use of PPE?	18. Are atmospheric hazards being monitored and controlled? • Have the atmospheric hazards identified (LEL, Toxic, O2 deficient)? • Are workers trained in the care and use of personal monitors? • Are monitors bump tested? • Are monitors calibrated?	Have you observed erosion of standards? Have you seen violation of standards?	



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Corrective Action Plan

Location:

Date of Inspection:

Note: Scoring may vary based on effectiveness of application of STRIKE HSEMS, therefore corrective action will be dependent on individuals and evaluation

EDCD - Expected Deficiency Correction Date

R - Who has primary responsibility for correction (initials)

DCD - Deficiency Corrected Date

CB - Confirmed by (initials)

Question	Corrective action	EDCD	R	DCD	CB

Additional Corrective Action Space – Next page

Inspection Results Reviewed and Corrective Action Plan Developed

Strike Supervisor/Foreman

Signature

Date

Strike Manager/Inspector

Signature

Date

Corrective Action Plan c/w all **DCD & CB** columns completed – to be forward to evaluator or his/her delegate by Date:

Management Sign Off

Line Management

Name

Position

Signature

Date

Senior Management

Name

Position

Signature

Date



Additional Corrective Actions					
Question	Corrective action	EDCD	R	DCD	CB

**Correction Plan Verification Follow up**

Location:

Date of Inspection:

Note:

1. Verification to confirm all corrective actions have been addressed must be followed up by the person who conducted the evaluation or his/her delegate
2. Corrections will be accepted as complete when a copy of the Correction Plan document is submitted to the evaluator or his/her delegate c/w all **DCD & CB** columns completed
3. Empty **DCD & CB** columns will indicate that the action items for that particular item are not addressed and remain outstanding – further follow up will be required by the manager or his/her delegate

A copy of the Correction Plan document was received by the evaluator or his/her delegate on:

Date :

The document indicates that all deficiencies are corrected with the exception of those listed below:

Question	Description	To be completed by (date)

Evaluator/Delegate Signature_____
Date