

Performance Indicator 2.1.1.1 - ES&H Culture Evaluation Tool

Evaluator:		Date:	
Org. Code:	Manager:	<i>Participant?</i> <input type="checkbox"/> Yes <input type="checkbox"/> No	
Job Code:	Job Title:	Facility:	
		(1=low	5=high)

1. Knowledge of Applicable Requirements		
a) What hazards are associated with this job? (<i>list hazards or subject areas</i>) _____	1	2
	3	4
	5	
b) What are the required hazard controls applicable to this job? (<i>Hint: consider SBMS Subject Area requirements</i>) <i>Comments:</i> _____	1	2
	3	4
	5	
c) How do you ensure the requirements are adequate and appropriate for this job? (<i>Can you provide input? Are you knowledgeable about the requirements?</i>) <i>Comments:</i> _____	1	2
	3	4
	5	
d) How are industrial hygiene or RadCon monitoring results provided to you for jobs like this? <i>Comments:</i> _____	1	2
	3	4
	5	
e) If you see a hazardous condition, what would you do? (<i>How would you stop the work if necessary?</i>) <i>List examples:</i> _____	1	2
	3	4
	5	
f) What could go wrong with this job and what would you do? <i>Comments:</i> _____	1	2
	3	4
	5	
2. Worker Involvement in Work Planning		
a) How were you involved in planning the work you are doing? (<i>i.e.: Prep & Risk, procedure development, RWP, Lessons Learned, Pre/post job briefing</i>) <i>List examples:</i> _____	1	2
	3	4
	5	
b) How effectively does your organization use a Safety Committee, safety meetings, or other forms of worker involvement to address ES&H issues important to your work? <i>List examples:</i> _____	1	2
	3	4
	5	
3. ES&H Training		
a) How was it determined the ES&H training that you need to do your job safely is appropriate? <i>List examples:</i> _____	1	2
	3	4
	5	
b) How would you rate the value and effectiveness of the ES&H training that you receive? <i>Comments:</i> _____	1	2
	3	4
	5	
4. ES&H Culture		
a) How does management demonstrate commitment to safety and the environment? <i>List examples:</i> _____	1	2
	3	4
	5	
b) How would you rate the ES&H culture in your organization? <i>Comments:</i> _____	1	2
	3	4
	5	
c) Do you feel like you have ownership in the ES&H program? Describe what makes you feel that way. (<i>Have you contributed to Lab-level requirements such as SBMS?</i>) <i>Comments:</i> _____	1	2
	3	4
	5	
5. ES&H Behaviors		
<i>Observe ES&H-related behaviors by the Staff Member:</i>		
a) safety glasses (<i>when required</i>).....	<input type="checkbox"/> Yes	<input type="checkbox"/> No
b) gloves (<i>when required – correct selection?</i>).....	<input type="checkbox"/> Yes	<input type="checkbox"/> No
c) other protective clothing	<input type="checkbox"/> Yes	<input type="checkbox"/> No
d) required permits in place.....	<input type="checkbox"/> Yes	<input type="checkbox"/> No
e) other hazard controls	<input type="checkbox"/> Yes	<input type="checkbox"/> No
	<input type="checkbox"/> N/A	<input type="checkbox"/> N/A
	<input type="checkbox"/> N/A	<input type="checkbox"/> N/A
	<input type="checkbox"/> N/A	<input type="checkbox"/> N/A
	<input type="checkbox"/> N/A	<input type="checkbox"/> N/A
	<input type="checkbox"/> N/A	<input type="checkbox"/> N/A

Note any other comments on back of form