

SAFETY DIAGNOSTICS

Aspects of health & safety management do we get on this project and where could we do better?

Please tick one box

- | | Really good | Fit for purpose | Could be better |
|---|--------------------------|--------------------------|--------------------------|
| a) Welfare facilities | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| b) PPE | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| c) Health and Safety training | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| d) Health and safety communications | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| e) Listening to the workforce | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| f) Procedures | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| g) Project planning | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| h) Housekeeping | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| i) Leadership | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| j) Permits to work | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| k) Treating everyone with respect | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| l) Understanding mental health problems | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| m) Improving workplace health and wellbeing | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| n) Collaboration and rewarding good work | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| o) Feedback on Observation cards | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| p) Implementation of reasonable adjustments | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| q) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| r) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

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