

TOOLBOX SAFETY MEETING MINUTES

Job: _____

Date: _____

The purpose of the crew talk is to discuss safety issues or concerns that exist on site with regards to our workers. Topics of discussion should focus on the concerns of workers, hazards that exist in the work areas and topics selected either from our SWP section or from general or specific observations made on site or those that may be passed on during meetings.

The crew talk is an opportunity to train and focus workers on safety in the workplace. Record discussion points accurately and with enough detail to provide for easy follow-up. Do not 'close-off' the crew talk record until all unresolved items have been addressed.

1. UNRESOLVED ITEMS FROM LAST MEETING:

2. DISCUSSION TOPICS

HIGH HAZARD SITUATIONS	EQUIPMENT & TOOLS	PPE	SUNDRIES
<input type="checkbox"/> Worker not within 20' of power-line high or low	<input type="checkbox"/> Power tools	<input type="checkbox"/> Approved hardhats (CSA)	<input type="checkbox"/> Ladder use
<input type="checkbox"/> Worker not in un-engineered excavation over 4' deep	<input type="checkbox"/> Hand tools <input type="checkbox"/> Tool use	<input type="checkbox"/> Work boots (CSA)	<input type="checkbox"/> Work benches <input type="checkbox"/> Hearing test current
<input type="checkbox"/> Worker not within 6' of slab edge	<input type="checkbox"/> Routine inspection	<input type="checkbox"/> Safety glasses / goggles	<input type="checkbox"/> Reporting unsafe conditions
<input type="checkbox"/> Worker not over 10' high w/o fall protection	<input type="checkbox"/> Routine maintenance	<input type="checkbox"/> Hearing protection	<input type="checkbox"/> Safe lifting practices
<input type="checkbox"/> Confined Spaces	<input type="checkbox"/> Adequate training	<input type="checkbox"/> Safety gloves	<input type="checkbox"/> Lone worker procedures
<input type="checkbox"/> Rebar Protection	STAIRS	<input type="checkbox"/> HI-VIS vests	SCAFFOLDS
HOUSEKEEPING	<input type="checkbox"/> Access to all floors	<input type="checkbox"/> Dust masks/respirator	<input type="checkbox"/> Braces
<input type="checkbox"/> Debris picked up	<input type="checkbox"/> Handrails	WHMIS	<input type="checkbox"/> Guardrails
<input type="checkbox"/> Equipment Stored	<input type="checkbox"/> Lighting	<input type="checkbox"/> Containers labeled	<input type="checkbox"/> Double planks
<input type="checkbox"/> Floors swept	<input type="checkbox"/> Housekeeping	<input type="checkbox"/> MSDS sheets available	<input type="checkbox"/> Tie-ins
<input type="checkbox"/> Materials Stored	FALL PROTECTION	<input type="checkbox"/> Workers trained	<input type="checkbox"/> Wheels/locks
ELECTRICAL	<input type="checkbox"/> Full Body Harness	EMERGENCY PROTOCOLS	<input type="checkbox"/> Frame condition
	<input type="checkbox"/> Safety Lines / Lanyards		<input type="checkbox"/> Footing/Foundation
<input type="checkbox"/> Power-cords	<input type="checkbox"/> Life-lines	<input type="checkbox"/> Notification	HYGIENE
<input type="checkbox"/> Task lighting	<input type="checkbox"/> Anchors points	<input type="checkbox"/> Pathways clear	<input type="checkbox"/> Portable Washrooms
<input type="checkbox"/> Assured grounding	<input type="checkbox"/> Swing Factor	<input type="checkbox"/> Adequate lighting	<input type="checkbox"/> Hand Washing
GUARDRAILS	<input type="checkbox"/> Fall Restraint	<input type="checkbox"/> Doors not barricaded	<input type="checkbox"/> Dust
<input type="checkbox"/> 42" top-rails	<input type="checkbox"/> Fall Arrest	<input type="checkbox"/> Signage	OCCUPATIONAL EXPOSURE
<input type="checkbox"/> Mid-rails	FLOOR OPENINGS	<input type="checkbox"/> Site plan	
<input type="checkbox"/> Toe-boards	<input type="checkbox"/> Covered, secured, marked	CONDUCT ON SITE	<input type="checkbox"/> Needles
<input type="checkbox"/> In place at all times	<input type="checkbox"/> Guardrails	<input type="checkbox"/> Drugs/Alcohol	<input type="checkbox"/> Blood Borne Pathogens
<input type="checkbox"/> 125 lbs lateral force	<input type="checkbox"/> Loading capacity	<input type="checkbox"/> Medication	<input type="checkbox"/> Condoms
OTHER TOPICS			
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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