

| How does your workplace rate? | Yes | No |
|---|--------------------------|--------------------------|
| Have you developed a work health and safety policy for your business? | <input type="checkbox"/> | <input type="checkbox"/> |
| Are people in your workplace made aware of their health and safety responsibilities? | <input type="checkbox"/> | <input type="checkbox"/> |
| Have you included health and safety in all existing work procedures? | <input type="checkbox"/> | <input type="checkbox"/> |
| Do you discuss health and safety issues with your workers and allow them to contribute to decisions that may effect their health and safety? | <input type="checkbox"/> | <input type="checkbox"/> |
| Do you review your work practices and procedures regularly, particularly when there are changes in the workplace, to improve health and safety? | <input type="checkbox"/> | <input type="checkbox"/> |
| Do you provide workers with adequate information, training and supervision so that they can perform their jobs safely? | <input type="checkbox"/> | <input type="checkbox"/> |
| Do you have an accident reporting, investigation and analysis system? | <input type="checkbox"/> | <input type="checkbox"/> |
| Do you have safe and unobstructed access to and from all work areas? | <input type="checkbox"/> | <input type="checkbox"/> |
| Are all of your work areas and stored items safe and free of clutter? | <input type="checkbox"/> | <input type="checkbox"/> |
| Do you have access to clean and suitable amenities at your workplace? | <input type="checkbox"/> | <input type="checkbox"/> |
| Do you have up to date Safety Data Sheets for all dangerous substances and chemicals used at your workplace? | <input type="checkbox"/> | <input type="checkbox"/> |
| Have you identified all potential dangers and safety problems in your workplace? | <input type="checkbox"/> | <input type="checkbox"/> |
| Have you worked out which of these has the greatest impact on health and safety and have you taken action to eliminate or reduce the risks? | <input type="checkbox"/> | <input type="checkbox"/> |
| Do you assess your workers competency on a regular basis and provide training where gaps in competency have been identified? | <input type="checkbox"/> | <input type="checkbox"/> |
| Do you keep records relating to safety activities? | <input type="checkbox"/> | <input type="checkbox"/> |
| Are all tools, equipment and machinery regularly checked and maintained? | <input type="checkbox"/> | <input type="checkbox"/> |
| Do you have emergency procedures and adequate first aid facilities? | <input type="checkbox"/> | <input type="checkbox"/> |

Notes:

If you answered NO to any of the questions above, you may be at risk of non-compliance with Work Health and Safety Legislation.

You can address this yourself or if like most, you are simply too busy, contact Bluetron Pty Ltd on 02 62622557 and we can organise a friendly consultant to assist you through the process to achieve a safe and compliant workplace.