CONTRACTOR OBSERVATION

General

Project / Location:		Date:	
Employee / Contractor (w/Company) Observed:			
Observer:		Type of Observation:	
Task or Function Observed:			
Employee / Contra	ctor Notified of Observation?		

Checklists

Task Observations

Elements / Description		Response
1.	Could any of the practices or conditions observed result in personal injury or property damage?	
2.	Were the observed methods and practices the most efficient and productive?	
3.	Did the practices you observed comply with all the applicable work standards that exist for the task?	
4.	Were the proper tools being selected and properly used for each task observed?	

Behaviour Observations

Elements / Description		Response
1.	Work pace controlled and not rushed	
2.	Eyes and mind on task	
3.	Keeping out of the "line of fire"	
4.	Maintaining proper balance / traction / grip	
5.	Potential for frustrations, fatigue and/or complacency	
6.	Quality of communication between crew members	
7.	Quality of communication with customer	

Behaviour Comment Section

Description		Response	
	1. Did you have to reinforce and/or reinstructed the work in any behaviours		
	listed in "Behaviour Observations"? If yes, which ones?		
	2. Should a follow-up observation of this work be made in the near future?		
	If Yes, complete next section.		

Follow-up Action or Comments	Follow-up Date