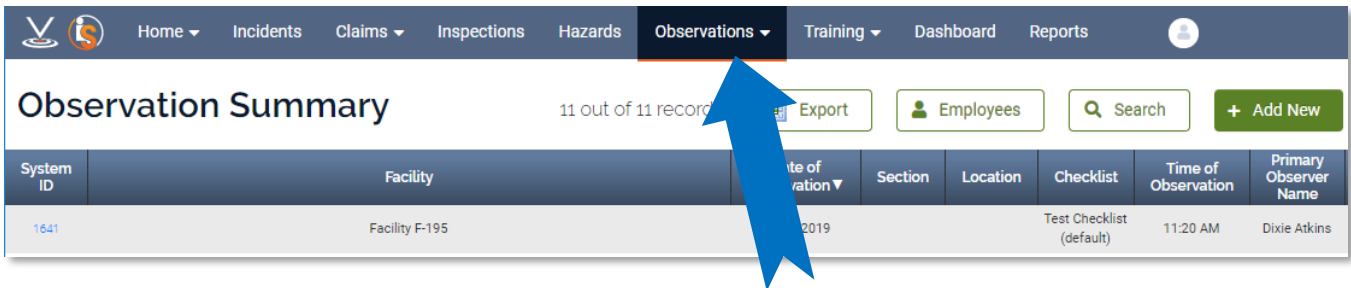


IndustrySafe Observations Reporting Guide

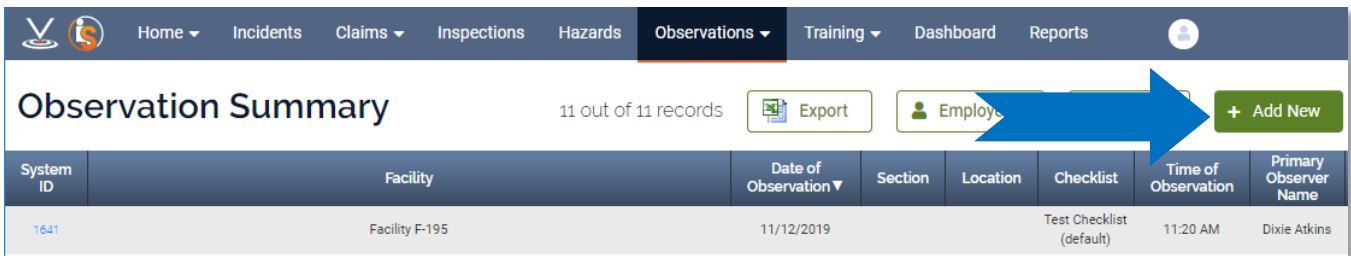
This guide describes the process for reporting Observations using the IndustrySafe Safety Management Software.

1 Open the Observations Module

1.1 Click on the **Observations** tab.



1.2 Click the green **Add New** button.



2 Complete the Observation Form

2.1 Select a checklist and then click the **Continue** button.

Select Observation Checklist

Continue

Category

Observation Checklist *

- Alternate Observation
- Behavioral Based Safety Observation (default)
- Test Checklist (alternative)
- Test Checklist (default)

2.2 Enter the name of the observer

The name of the observer will be automatically filled in with the name of the current user. To select a different observer, clear the name in the Primary Observer Name field and start typing the first or last name to search for the observer. When you find the name, click on it to fill in the person's name and location information if applicable.

| Basic Information | |
|-----------------------------|---|
| Category | <input type="text"/> |
| Checklist | Behavioral Based Safety Observation (default) |
| Division * | Division D-1 |
| Facility * | Facility F-041 |
| Section | Section Seven |
| Location | <input type="text"/> |
| Department | <input type="text"/> |
| Primary Observer Name * | as |
| Internal Observation Number | Kasey Ashley -- emp01005 |
| Date of Observation * | Asa Banks -- emp00344 |
| Time of Observation * | Asa Johns -- emp00944 |
| Length of Observation | Asa Mclean -- emp00744 |
| | Asa Petty -- emp00544 |
| | Asa Simmons -- emp00144 |

2.3 Complete the **Basic Information** Section.

Basic Information
Top ↕

| | |
|-----------------------------|--|
| Category | <input style="width: 95%; height: 20px;" type="text"/> |
| Checklist | <input style="width: 95%; height: 20px;" type="text" value="Behavioral Based Safety Observation (default)"/> |
| Division * | <input style="width: 95%; height: 20px;" type="text" value="Division D-7"/> |
| Facility * | <input style="width: 95%; height: 20px;" type="text" value="Facility F-107"/> |
| Section | <input style="width: 95%; height: 20px;" type="text"/> |
| Location | <input style="width: 95%; height: 20px;" type="text"/> |
| Department | <input style="width: 95%; height: 20px;" type="text" value="Department5"/> |
| Primary Observer Name * | <input style="width: 95%; height: 20px;" type="text" value="Kasey Ashley"/> |
| Internal Observation Number | <input style="width: 95%; height: 20px;" type="text"/> |
| Date of Observation * | <input style="width: 95%; height: 20px;" type="text" value="11/21/2019"/> |
| Time of Observation * | <input style="width: 95%; height: 20px;" type="text" value="9:30 AM"/> |
| Length of Observation | <input style="width: 95%; height: 20px;" type="text"/> |

2.4 Complete the **Observation Details** section.

Note: The fields shaded in grey will automatically be filled in when the form is saved.

Observation Details
Top ↕

| | |
|--------------------------------|---|
| Comment or Follow-Up Actions | <input style="width: 95%; height: 40px;" type="text"/> |
| Number Required to be Observed | <input style="width: 95%; height: 20px;" type="text" value="0"/> |
| Contact Name | <input style="width: 95%; height: 20px;" type="text" value="Start typing name here"/> |
| Total Observed | <input style="width: 95%; height: 20px;" type="text" value="0"/> |
| Observed - Safe | <input style="width: 95%; height: 20px;" type="text" value="0"/> |
| Observed - Unsafe | <input style="width: 95%; height: 20px;" type="text" value="0"/> |

2.5 Complete the checklist

Click on a cell in the Safe or Unsafe (At-Risk) columns to check that item. A one will automatically be entered in each cell that you click on. To record multiple observations for the same category, change the value in the cell to the appropriate number.

| Ergonomics | | | | | |
|---------------------|----------------------------|----------------------------|----------------------------|----------------------------|-------------------|
| Topic | Safe Act | UnSafe Act | Safe Condition | UnSafe Condition | Follow Up Require |
| Back | <input type="checkbox"/> 1 | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | No ▾ |
| Chair/Seat Position | <input type="checkbox"/> | <input type="checkbox"/> 1 | <input type="checkbox"/> | <input type="checkbox"/> | Yes ▾ |
| Driving Position | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> 1 | <input type="checkbox"/> | No ▾ |
| Lifting | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | No ▾ |
| Neck | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> 1 | Yes ▾ |
| Wrist | <input type="checkbox"/> 1 | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | No ▾ |

2.6 Save the form.

| | | | | | |
|-----------------|----------------------------|----------------------------|--------------------------|--------------------------|-------|
| Misuse of Tools | <input type="checkbox"/> 1 | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | No ▾ |
| Pit Board | <input type="checkbox"/> | <input type="checkbox"/> 1 | <input type="checkbox"/> | <input type="checkbox"/> | Yes ▾ |
| ... | <input type="checkbox"/> 1 | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | No ▾ |

3 Additional Features

3.1 To attach supporting documents (Photos, etc.) you can click the **Attach File** button.

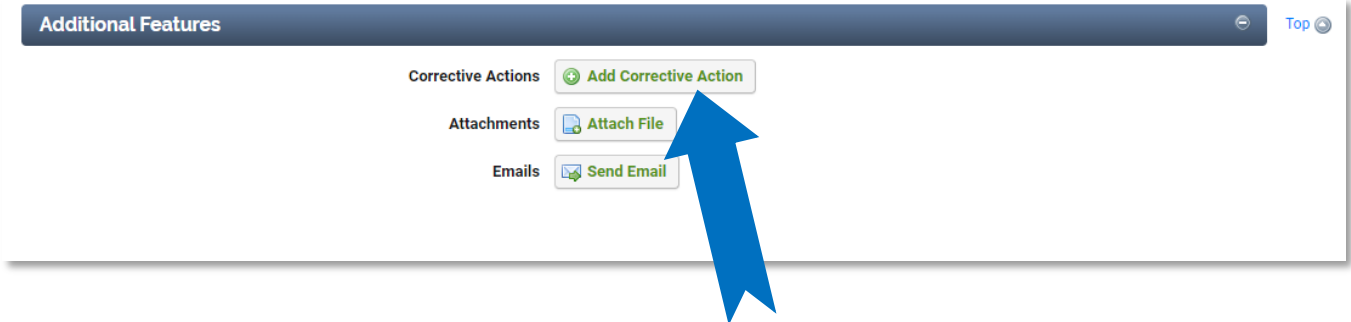
Additional Features Top ↕

Corrective Actions

Attachments

Emails

3.2 To add corrective actions, click the **Add Corrective Action** button.



3.3 To view a print-out of the observation, click the **Print** button.



Note: To print an Observation Card, click the **Print Card** button.

4 General Notes about IndustrySafe

- Fields with a red * are required.
- Ensure that your browser allows pop-ups from IndustrySafe. This is required for certain features such as printing reports and attaching supporting documents.
- You may save the form at any time to ensure that you do not lose your work (even if you have not completed all required fields).
- If you do not save or refresh the screen for 30 minutes you will be logged out due to inactivity. Upon automatic logout, any form that you may have open on the screen will be saved. A pop-up will alert you before this happens.
- Additional help may be obtained by clicking the Help icon within the navigation pane at the top of the screen.

