

# About the Safety Checklist for Construction

This form is designed to be completed by safety liaisons (peer leaders) trained in recognizing safety hazards in residential and other small-scale construction. Safety checklists can be completed as an outside observer (“from the sidewalk”) or by someone who is actively working at the construction site. If the observer is working there, the checklist can be completed during work (“on-site”) or at another time (“off-site”), shortly before or after. The purpose of the audit is to collect data on conditions at construction sites, monitor changes over time, and provide safety liaisons with a menu of conditions that they can check and potentially improve. It is NOT equivalent to a review of whether the job site meets OSHA standards and does NOT include all aspects of safety and health at construction sites. However, many of the items to be completed (such as scaffold safety) are derived from OSHA construction standards and further information on those hazards can be found at [www.OSHA.gov](http://www.OSHA.gov). The hazards and equipment included in this audit were chosen because they are commonly reported among construction day laborers in New Jersey or are hazards that result in significant injuries in residential construction. Hazards and safety procedures included in the checklist (such as presence of guardrails, availability of PPE) are typically observable by safety liaisons in a normal workday. The form also includes a section where the safety liaison can describe what actions were taken at that job site and any further comments on the situation. Safety liaisons are trained on how to complete this safety audit during a train-the-trainer session that builds on the OSHA 10 curriculum for construction. Safety liaisons are encouraged to complete a safety audit on each new work site or after major changes in activities or location.

**CONSTRUCTION SAFETY CHECKLIST**  Find and record common construction hazards.

City, Street/Address \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Observer (Initials) \_\_\_\_\_ Date Observed \_\_\_\_\_

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PERSONAL PROTECTIVE EQUIPMENT: Needed at this worksite?					Yes <input type="checkbox"/>	No <input type="checkbox"/>	Not Needed <input type="checkbox"/>	DK <input type="checkbox"/>	COMMENTS
<b>HARD HATS</b>									
1. Supplied by employer	Yes	No	Not Needed	DK					
2. Worn when required	Yes	No	Not Needed	DK					
<b>BOOTS</b>									
1. Supplied by workers	Yes	No	Not Needed	DK					
2. Worn when required	Yes	No	Not Needed	DK					
<b>HEARING PROTECTION</b>									
1. Supplied by employer	Yes	No	Not Needed	DK					
2. Worn when required	Yes	No	Not Needed	DK					
<b>EYE PROTECTION</b>									
1. Supplied by employer	Yes	No	Not Needed	DK					
2. Worn when required	Yes	No	Not Needed	DK					

For more information on this checklist, please contact the Rutgers School of Public Health (Elizabeth G. Marshall, [www.sph.rutgers.edu](http://www.sph.rutgers.edu)) or New Labor ([www.newlabor.org](http://www.newlabor.org)). Find controls to reduce or eliminate construction site hazards: [www.cpwrConstructionSolutions.org](http://www.cpwrConstructionSolutions.org).