



FALL PROTECTION ANNUAL SYSTEM REVIEW

Instructions: The Fall Protect Program must be reviewed annually by the EHS Director. This form can be utilized to document that review

EHS Director or delegate:	Date of Review:
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Check “ ” items that are “OK”, “ ” box for items that require corrective action.

- A. Review written system for currency and accuracy with:
 - Names & Roles
 - Procedure, References & Phone Numbers.
 - Requirements & Process

 - B. Review Fall Protection Devices to ensure they are maintained in good operating condition.
 - Review completeness and accuracy of periodic inspections.
 - Retention of Periodic Inspections is covered in the system and adhered to.
 - Observe Devices being used for any deficiencies (note device number)

 - C. Review Device Storage to ensure:
 - Individual has correct device.
 - Storage area is kept clean and dry.
 - Personal devices must be in their control.

 - D. Review training records to ensure:
 - Training included class and hands on evaluation.
 - Annual refresher training documentation is complete.
 - Records are complete and current.
- Review opportunities for refresher training to ensure it is being delivered for incidents, unsafe observations, etc.
- Observe at least 2 trained employee for safe use of fall protection, cross reference against training records. Document names and any issues found.

Describe any Corrective Actions needed below:

Section	Describe Action Needed to Correct Deficiency	Assigned To:	Due Date:	Actual Completion :