Observation T-Chart

The Health and Safety Measure I am observing is: ________________________________

In your own words, describe the safety measure:
________________________________________
________________________________________
________________________________________

Where did you make your observation? _______________________________________

What day and time? _________________________________________________________

<table>
<thead>
<tr>
<th>How is the safety measure working well?</th>
<th>Where is there room for problems?</th>
</tr>
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<tbody>
<tr>
<td></td>
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