**Tool Box Talk Record**

**What is a “Toolbox Talk”?**

A “toolbox talk” is another term for a safety meeting.

The term “Toolbox Talk” was originally used as a way to encourage building workers to have a regular documented safety meeting. The best time to do this was considered to be when they stood around the tool box in the morning before starting work, so the term Toolbox Talk was born.

Today the Toolbox Talk is widely accepted as a common way of ensuring consultation occurs between workers, and is a practical way to raise workers’ awareness of specific problems on site. It also helps to remind workers that health and safety are an important part of the working day.

Toolbox Talks should be scheduled as needed, depending on the level of risks faced on the job, or the levels of experience of the workers. Management should assess how often and for how long Toolbox Talks should be held in your company.

The Toolbox Talk should generally, but not necessarily, be conducted by an employee of supervisory level or with basic WHS awareness. Any issues raised that cannot be resolved should be addressed by senior management.

The following information should be included when completing a Toolbox Talk Form:

* names and signatures of all persons present – this is important to show who has participated in the meeting,
* topics discussed - this shows what topics were covered during the meeting,
* any job specific training or instructions that have been given in the meeting, and
* Who raised the issue or added to the discussion, to show that there has been active consultation with all persons attending the meeting, and that all parties have had a chance to raise issues rather than the Toolbox Talk just being a lecture conducted by the supervisor.

Toolbox Talks are an excellent way of allowing open consultation within any business structure and should always be documented and reviewed.

Here are a list of common topics for consideration

* What Does An Accident Cost
* Near Misses
* Care For the Injured
* Accidents Are Avoidable
* Listen For Danger - Listening Safety
* Accident/Incident Reporting
* Sample Report Form
* Common Sense Subjects
* Safety is Common Sense
* Keeping in Shape
* Proper Lifting
* Short Cuts
* Protecting the Public
* Children and Construction
* Traffic Control
* Barricades & Warning Devices
* Effects of Weather
* Heat Exhaustion/Sunstroke

Personal Protective Equipment

* Construction Clothing
* Head Protection - Hard Hats
* Eye Protection
* Foot Protection
* Hand Protection
* Personal Protective Equipment - Concrete Construction
* Knee Pads
* Respirators
* Housekeeping
* Material Handling
* Material Storage
* Tool Use and Care
* The Right Tool For The Right Job
* Hand Tools
* Screwdrivers
* Wrenches
* Hammers/Chisels
* Nails Are Dangerous Too
* Table Saws
* Electric Power Tools
* Electric Hand Saws
* Portable Electric Tools
* Powder Actuated Tools
* Chain Saws
* Residential Construction
* Injuries, Falls From Elevated Heights
* Training Requirements - Fall Hazards
* Falls
* Ladders
* Fall Causes Death: Ladders Are Killers
* Floors and Other Openings
* Guardrails
* Ramps and Runways
* Injuries, Being Caught Between or Under
* Excavations
* Excavation: Additional Discussion Points
* Trenching
* Dangers Overhead
* Working in Confined Spaces
* Heavy Equipment
* Heavy Equipment Hazards
* Working Around Cranes
* Electrical
* Electrical Hazards
* Power Lines and Mobile Cranes
* Fire Protection
* Fire Protection and Control
* Fire Extinguishers
* Refuelling Equipment
* Petrol
* Vehicle Safety
* The Spotter
* Signalling Techniques
* Vehicle Operations
* Quick Reference Guide
* "Tool Box Talk" Training Record
* Safety Training Steps

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| Project: |       | Job No: |       |
|  |
| Work Area: |       | Supervisor: |       |
|  |
| Subcontractor: |       |
|  |
| Date |      /     /      | Time |       am/pm |

**Subject Matter *(Pre-Plan)***

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| 1.0 Actions from last meeting |       |
| 2.0 Injuries last week |       |
| 3.0 Near misses last week |       |
| 4.0 Safety items discussed |       |
| 5.0 Comments from the floor |       |
| 6.0 New Business |       |
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|       |       |

# Attendees

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| **Print Name** | **Signature** | **Print Name** | **Signature** |
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**Attendance Verified:**

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| Name: |       |  |  |
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| Signature: |  | Date: |      /     /      |

**Sign-off and Reviewed by:**

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| --- | --- | --- | --- |
| Supervisor Signature: |  | Date: |      /     /      |

# Meeting Minutes/Actions

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| --- | --- | --- |
| **Item** | **Minutes** | **Action** |
|  |  | ***By whom*** | ***By When*** |
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