

## Safety rule enforcement

Organization name: \_\_\_\_\_

*An enforcement action is only appropriate in cases of deliberate actions by employees. It is important that you understand the employee's decision—both the context of the situation and the employee's motivation—when selecting the appropriate corrective measures (if any).*

Employee name: \_\_\_\_\_ Date: \_\_\_\_\_

### TYPE OF ENFORCEMENT ACTION BEING DOCUMENTED

☐ Verbal warning    ☐ First written warning    ☐ Repeated written warning    ☐ Suspension    ☐ Termination

### DESCRIBE THE INCIDENT. WHICH RULE(S) DID THE EMPLOYEE FAIL TO FOLLOW?

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### RESULT OF VIOLATION

☐ Injury    ☐ Near miss    ☐ Equipment/property damage    ☐ Other: \_\_\_\_\_

Provide additional detail about the outcome, or in the event of a near miss the potential outcome, resulting from the employee's failure to follow rules.

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### CORRECTIVE ACTION

☐ Coaching    ☐ Training    ☐ Refresher training    ☐ Counseling    ☐ Other: \_\_\_\_\_

### EMPLOYEE COMMENTS (OPTIONAL)

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Employee signature: \_\_\_\_\_ Date: \_\_\_\_\_

Supervisor signature: \_\_\_\_\_ Date: \_\_\_\_\_

*Please review and customize this sample document to reflect your organization's expectations. This is to be used as a supplement to and not in lieu of OSHA safety regulations and policies. Pinnacol Assurance assumes no responsibility for management or control of customer safety activities.*