

Control Verification

Planning and Follow-Up Sheet

Verify what a control actually does in the work. Separate installation, use, and effectiveness; an action marked complete is not proof that risk has been reduced.

Task / location: _____ Review date: _____

Case / change reference: _____ Reviewer / owner: _____

1 State the exposure and intended protection

Hazard / exposure / conditions that matter:

Control and its intended function: What should it prevent or limit?

2 Define what good performance looks like

Acceptance criteria / approved source / version / applicable limits:

Safe verification method / sample or conditions / competent support needed:

Use approved observations, records, inspections, or authorized tests. Never create an exposure, bypass a safeguard, or stage an unsafe failure to test a control.

3 Check the control with the people doing the work

Is it present, serviceable, and available when needed?

Is it used as intended? What makes it difficult or encourages workarounds?

Does evidence show it performs the intended protective function?

What changes with workload, staffing, environment, or unusual conditions?

4 Agree on response and follow-through

If missing / unreliable / unverified: restriction, escalation, and responsible person:

Next review / trigger for recheck / how workers will hear the result:

Do not conclude effectiveness from absence of incidents alone. Record uncertainty and the limits of the check.

Control Check and Follow-Up Record

Task / location: _____ Reference: _____ Review date: _____

Record the conditions checked and the evidence supporting each conclusion. Result options: Meets criteria / Gap found / Not verified / Not applicable (explain).

Control / intended function Acceptance criterion	Conditions / method Evidence reference / date	Result / limits Installation, use, effectiveness	Response / action owner Restriction / due date	Recheck evidence / result Reviewer / close or reopen

Worker feedback / difficulty using the control / adaptations:

Unintended effects / shifted exposure / dependencies not checked:

Disposition: Continue within verified limits / Correct and recheck / Restrict and escalate / Deeper learning needed

Authority / reviewer / date: _____ Worker feedback / communication date: _____

Follow site procedures and authorized personnel for restrictions and return to service. This record supports verification; it does not certify compliance or replace required inspections. Make extra copies for additional controls.