

Weekly Safety Meeting



CELL PHONES

Cell phones use cellular network technology to send or receive calls. Everyone today has a cell phone. They make getting in touch with anybody at any time much easier, and they can be useful in many other ways. For example, they can be used for contacting your kids/friends/workplace, calling for help in an emergencies, searching for directions or using a GPS, sending or receiving emails/pictures/videos, and more. Cell phones also have some disadvantages. They can be a distraction while driving and cause accidents, they can put people at risk for security or privacy breaches, and they can cause health problems. According to the world health organization, the radiation from cell phones and Wi-Fi has led to some health effects in children. Also, wireless radiation can cause biological changes in the human body. The National Safety Council study shows driving and using a cell phone increases the risk of crashing by four times and contributes to 6% of all crashes. OSHA encourages employers to establish work procedures and rules that prohibit employees from texting while driving for job duties. Some Safety Rules:

Turn off your cell phone before starting your car.

Stop at a safe place to answer your phone.

Minimize your time talking on the phone.

Use the speaker phone.

Keep the cell phone away from your body.

Keep the cell phone off or away from your bedroom at night.

Avoid wearing metal glasses when speaking on the cell phone (attracts radiofrequency radiation that can be absorbed by the eyes).

Keep cell phones away from small children.

Do not text and drive.

Employees should use personal cell phones during their break times.

Cell phones must be turned off during training hours, conferences, and meetings.

Do not use cell phone cameras at work.

Work Site Review: Hazards/Safety Suggestions

Company Name: _____

Work Site Location:

Date: ______ Start Time: ______ Finish Time: ______ Foreman/Supervisor: ______

Employee Signatures: (continue on back of sheet if necessary)

(My signature attests and verifies my understanding of and agreement to comply with, all company safety policies and regulations, and that I have not suffered, experienced, or sustained any recent job-related injury or illness)

Manager/Supervisor's Signature:

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