




SPA-TAKE 5 FOR SAFETY – BEFORE – DURING – AFTER – THE ACTIVITY

EHS – Hazard and Risk Assessment

EHS – SAFE PLAN OF ACTION

PART 1	Company Name: Cork Scaffolding (CSC) Ltd		Job/Tag Ref:						EMERGENCY DETAILS			
	Task Location:								Supervisors Name:		Tel:	
	Task Description:								First Aid responder:		Tel:	
	<input type="checkbox"/> Erect <input type="checkbox"/> Dismantle <input type="checkbox"/> Modification								Location of First Aid Box:			
	List of Equipment to be used:								Location of AED:			
	Start Date: / /								End Date: / /		Location of Fire Extinguishers:	
PART 2	Work at Height (W@H): Complete this section for work at height				W@H Controls		✓	Other Factors		✓		
	Have I got?	Y	N	Comment if answer is No. (Supervisor to Check)	Personal Fall Arrest Equipment:			Safe Distance from Electricity & Cables				
	Adequate Manpower				Scaffold Step (if feasible).			Confined Space				
	Adequate Lighting				Exclusion Zone: Barriers etc			Weather Conditions				
	Correct PPE				Signage in place:			People/Public present				
	A Proper Foundation				Scaff Tags in place:							
	1. Stop, Step Back and Observe Observe work area and surrounding location for actual or potential problems.				2. Think Through Activity Consider the sequence of steps involved in carrying out the activity from start to finish		3. Identify Hazards Identify the hazards associated with the activity including any present within the immediate and surrounding work area, and those generated by the activity		4. Control Hazards Implement control measures to remove and communicate the hazard or reduce the risk of an accident or incident and communicate		5. Safely complete the activity Once all control measures have been implemented, commence the activity.	
	STEPS OF THE TASK – list the steps of the task to be taken in order e.g. 1. Bring equipment to workplace; 2. Set up barriers; 3. Unload/load. 4. Erect/Dismantle/Modify 4. Housekeeping and demobilisation				IDENTIFY THE HAZARDS / LIVE SERVICES - Chemicals, Dust, Electricity, Fire, Gas, Hand Tools, Spills, Liquids/Gasses under pressure, Machinery, Manual Handling, Noise, Sharp edges, Slips Trips & Falls, Steam, Water, Work at Heights, Busbars, Sprinkler / Smoke Heads, EX / ATEX Zones, Live Panels, Trapping, Crushing etc.				IDENTIFY THE CONTROLS- Steps to eliminate or reduce the hazard, Avoid, Substitution, Isolation, Environmental controls, Housekeeping, Ventilation, Safety awareness, Training & Supervision, Personal Protective Equipment (PPE)			
	1.				1.				1.			
	2.				2.				2.			
	3.				3.				3.			
	4.				4.				4.			
	5.				5.				5.			
	Prepared by:				Date:		Permit Ref:		RAMS Ref:			
What other contractors will be affected by this task?				Have other contractors been informed of the hazards?		Yes <input type="checkbox"/>		No <input type="checkbox"/>				
Checked by:		PRINT:		SIGNATURE:		DATE:						

I AM RESPONSIBLE FOR MY SAFETY & THE SAFETY OF MY COLLEAGUES

SIGNATURES OF TEAM

**I UNDERSTAND THE SAFE PLAN OF ACTION:
I am fit to carry out the assigned task.**



IF IT'S NOT SAFE DON'T DO IT, STOP AND INFORM MANAGEMENT

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PART 3