

PRE – DEPARTURE

IMPORTANT THINGS TO CHECK & REMEMBER

1. Look at the bottom of this page, and ensure that your Project Manager, and Group Health & Safety Representative have approved this H & S Plan.
2. Ensure that your project manager has gone through the Hazard Assessment with you, and explained all the hazards associated with the work that you will be performing
3. Ensure that you have all the PPE, and are trained in the areas which are indicated on page 6.
4. Familiarize yourself with the Emergency Response Plan for the site (p. 7), prior to site arrival.
5. Check the weather in the immediate area that you are going to, and ensure that the current weather conditions do not create additional hazards that have not been planned for.
6. Physically test all of your means of communication, to ensure that they function, and you are familiar with the controls.
7. If you are going to an active site: Do not begin working until you have been given an orientation from the site H & S Coordinator, and have reviewed the site’s Health & Safety Manual.
8. **VERY IMPORTANT:** You have the right to refuse any work that you feel is unsafe, or that you are not trained to do.

<u>Field Health & Safety Plan Approval</u>			
Project Name:		Project #:	
Project Manager:	<i>signature</i>	Date:	
Health & Safety Rep.	<i>signature</i>	Date:	
Principal / Associate	<i>signature</i>	Date:	

FIELDWORK HEALTH & SAFETY PLAN

POTENTIAL HAZARD ASSESSMENT

Date: _____ **Project:** _____ **Assessment Performed By:** _____
Location: _____ **Project Manager:** _____
Description Of Site : _____
Work To Be Done: _____

Hazard	Yes / No		Notes	Necessary Controls	Safe Work Proced. Reference
	Y	N			
<u>Travel to site:</u>	Y	N			(located in Appendix)
Railway	[]	[]			
Helicopter	[]	[]			
Boat	[]	[]			
Public Roads	[]	[]			
Private Road	[.]	[]			
Other	[]	[]			
<u>Site Terrain</u>	Y	N			
Shafts/Trenches/Slopes	[]	[]			
Overhead Hazards	[]	[]			
Water Hazards	[]	[]			
Underground Utilities	[]	[]			
Confined Space(s)	[.]	[]	** NOTE 1**		
Trip / Fall Hazards	[]	[]			
Other	[]	[]			
<u>Work at Heights</u>	Y	N			
Ladders/ Scaffolds	[]	[]			
Work Platforms	[]	[]			
Shafts	[]	[]			
<u>General Work Environment</u>	Y	N			
Heat / Cold Stress	[x]	[]			
Remote Site	[]	[]	** NOTE 2**		
Noise Levels	[]	[]			
Wild Animal Habitat	[]	[]			
Poor Lighting	[]	[]			
Extended work hours	[]	[]			
Working Alone	[]	[]	** NOTE 2**		
Contaminated Site	[]	[]	See Contaminant Section		
<u>Mechanical Process:</u>	Y	N			
Unstable Structures	[]	[]			
Moving Parts	[]	[]			
Drilling / Pile Driving	[]	[]			
Excavation	[]	[]			
Projectiles / Sharps	[]	[]			
Electrical Equipment	[]	[]			
Heavy Lifting	[]	[]			
Awkward Postures	[]	[]			
Welding	[]	[]			

** NOTE 1 An additional Plan is required for this hazard- See Appendix

** NOTE 2 Additional forms need to be completed for this hazard- See Appendix

**** NOTE 1 An additional Plan is required for this hazard- See Appendix**

Hazard	Yes / No		Notes	Necessary Controls	Safe Work Proced. Reference
	Y	N			
<u>H.Duty Machinery & Mobile Equipm.</u>					(Located in Appendix)
Driver Competency	[]	[]			
Driver Visibility	[]	[]			
Communication	[]	[]			
Fuel Stations	[]	[]			
Machine condition	[]	[]			
Day to day condition	[]	[]			
Machinery Routes	[]	[]			
Other	[]	[]			
<u>Chem & Biological Contaminants</u>					
Dust	[]	[]			
Carcinogens	[]	[]	**NOTE 2**		
Radioactive Particles	[]	[]	**NOTE 2**		
Oxygen deficient	[]	[]	**NOTE 2**		
Asbestos	[]	[]	**NOTE 2**		
Explosive atmosphere	[]	[]	**NOTE 2**		
Mould	[]	[]	**NOTE 2**		
Other contaminants	[]	[]	**NOTE 2**		
<u>WHMIS-TDG concerns</u>					
Fire	[]	[]			
Chemical Storage	[]	[]			
Compressed Gas	[]	[]			
Explosives (storage)	[]	[]			
Explosives (transport)	[]	[]			
Nuclear Densometer	[]	[]			
Other					
<u>Other</u>					
Hired Contractors	Y	N	ARE THEY REGISTERED WITH THE WCB?		
	[]	[]			
	[]	[]			
	[]	[]			
	[]	[]			
	[]	[]			
	[]	[]			
	[]	[]			
	[]	[]			

**** NOTE 2 Additional forms need to be completed for this hazard- See Appendix**

Signature of Project Manager: _____

Date:

This signature indicates that the above project manager is aware of the potential hazards at this site, and will communicate these hazards, and appropriate controls to staff prior to their deployment on site.

SITE HEALTH & SAFETY RESPONSIBILITIES
(fill in shaded boxes with appropriate names)

Client

- H & S of site is ultimate responsibility of client, unless passed to Prime
- Coordinate H & S efforts on site, or delegate this to a Prime Contractor

Prime Contractor*(Must have agreement with the client to perform this duty)*

- Develop Health & Safety Plan for site
- Perform site Orientation for all those conducting work on site
- Conduct Tailgate safety meetings on a regular basis, involving representatives from all contractors on site to discuss daily operations, and site hazards / concerns.
- Ensure that First Aid treatment is provided for workers on site

Project manager

- Direct identification of project hazards
- Direct specification of hazard controls with input from Regional H & S Coordinator
- Direct development of H & S Plan (HASP) for the site
- Communicate H & S plan to:
 - Project Team
 - Other contractors working on site
 - Prime Contractor
- Report Incidents to Office Manager, and Regional H & S Coordinator
- Perform Accident Investigations, or delegate to qualified personnel
- Maintain relevant H & S records and documentation in project file
- If is not the Prime Contractor, the project manager must follow the site H & S plan laid out by the Prime Contractor, and add components from the H & S Plan where necessary

Professionals & Technicians

- Read & Comply with all aspects of the Health & Safety Plan being used on site
- Refuse to perform any work that you feel is unsafe
- Use & take care of all prescribed Personal Protective Equipment (PPE)
- Report unsafe working conditions or hazards to your project manager, and regional H & S Coordinator
- Responsibilities that your project manager has delegated to you
- Inform your project manager if the H & S Plan requires any significant changes, due to changing conditions, or previously unidentified hazards

Other Contractors

- Read & Comply with all aspects of the site Health & Safety Plan (sign off required)
- Provide the Prime Contractor with contact information for their H & S representatives
- Have representation at all H & S meetings and tailgate talks

First Aid Attendant

- Read & Comply with all aspects of the site Health & Safety Plan
- Provide First Aid treatment in a timely fashion to any injured / sick workers on site
- Do not undertake any work that would interfere with the ability to provide First Aid treatment
- Notify of any serious injuries to Employees within 24 hrs
- Complete WCB form 7A's when required, and send completed forms to WCB within 72 hours of treatment

PERSONAL SAFETY EQUIPMENT & TRAINING REQUIREMENT SUMMARY

<u>Personal Protective Equipment (PPE) & Additional Equipment Required</u>			<u>Training Requirements</u>		
PPP/ Equipment	Type / Level	Quantity Required	Training Program	Type / Level	Staff Requiring Training
Hard Hat			Confined Space Entry		
Eye Protection			Respirator Fit Testing		
Face Protection			Industrial First Aid		
Hearing Protection			Transport. Danger. Goods		
Respirator			Emergency Procedures		
SCBA			Boat Safety		
TYVEK Suit			Self Rescuer Use		
Hi-Vis Vest			Helicopter Safety		
Fall Protection			Fall Protection Training		
Life Preserver (PFD)			Rescue Training		
Cold Weather Gear			HAZWOPER		
Self Rescuer			Health & Safety (Golder U)		
Dosimeter(Badge)					
Headlamp					
Boots	x				
Gloves					
Bear Spray					
Air Quality Monitor					
Fire Extinguisher					
First Aid Supplies					
Whistle/ Air horn					
Washing Facilities					
Drinking Water	x				
Additional Communication					

CHANGES TO THE FIELD HEALTH & SAFETY PLAN

- If the conditions / hazards in the field are significantly different from those anticipated / assessed in the Risk Assessment performed on pages 2,3, the Project Manager (PM) must be informed immediately. At this point the PM will decide on the appropriate course of action, and give you verbal authorization to enter this information into the **special instructions** section on page 1 of this manual. This may include a temporary work stoppage.

EMERGENCY RESPONSE PLAN



- **If there are contractor's in addition to working at the site, then the prime contractor must be contacted for the following information. If is the prime contractor, then we must inform all other contractors of the following information. (see page bottom for contractor contact info)**
- **If is not the prime contractor, then we must follow the response plan of the prime, and give them the contact information for our Health & Safety Representative on site.**

How to Contact First Aid

1. Method of Communication: Cell/ in person Location of First Aid: Truck/bin
2. Channel or phone number to be used _____
3. Name of person(s) providing First Aid _____

Nearest Telephone if outside assistance is required: _____ **See Emergency #'s at page bottom**

Fire / Explosion or other Emergencies Requiring Evacuation:

In the event of a fire or explosion, if the situation can be readily controlled with available resources without jeopardizing the health and safety of yourself, the public, or other site personnel, take immediate action to do so, otherwise:

1. Notify emergency personnel by calling 911
2. If possible, isolate the fire to prevent spreading.
3. Evacuate the area.
4. Assemble at Muster Station **Muster Station Location:** _____
5. Perform head count to ensure complete evacuation
6. Inform Emergency Personnel of any missing team members

Chemical Exposure:

Site workers must notify the site health and safety coordinator immediately in the event of any injury, or if signs or symptoms of overexposure to hazardous substances are exhibited. Specific hazardous substances expected at the site are identified and listed on the following page & MSDS's in the Appendix.

On Site Injury Or Illness:

In the event of an injury requiring more than minor first aid, or any employee reporting symptom(s) of illness, or exposure to hazardous substances, immediately take the victim to:

Hospital Name _____ Address: _____
 : _____
 City: _____ Telephone: _____

Reporting of Accidents / Incidents

1. In the event of an accident or near miss, the Incident / Accident Report Form (located in Appendix) must be completed and returned to either or the H&S Coordinator for the office.
2. If an injury requires further treatment from an outside facility, or may cause the employee to miss work, a WCB Form 7A must be completed by the First Aid attendant, and faxed to the indicated WCB number on the form within 72 hours. A copy must also be given to either or the H&S Coordinator.

Important Emergency Contact Numbers

Function	Contact #'s
Ambulance	911
Fire Department	911
Emergency Evac	911

Contractor Safety Rep	Contact #

****This Emergency Response Plan may need to be added to if special site conditions exist****