

## Non-Routine Task: "All Work is Planned"

All work performed is planned and all employees are trained on the hazards and controls. This checklist is required when tasks need to be completed that are outside the scope of normal day-to-day operations and / or if job specific safety instructions are not available. **\*\*\*All employees must be trained and authorized in tasks required under local and federal laws. (i.e. lockout tagout, mobile equipment, etc.)**

**Define the Work: Provide a brief description of the tasks you are planning.**

### Analyze the Hazards: Determine the Hazards and Level of Employee Involvement

	Likelihood					Level of Employee Involvement	
Severity	How likely is it to hurt someone?						
How seriously can it hurt someone?	Very Likely	Likely	Occasional	Unlikely	Very Unlikely		
Extreme						<b>Red:</b>	Additional Management, Hourly Employee and
Major						<b>Orange:</b>	General Manager Required and
Moderate						<b>Yellow:</b>	Plant Manager Required and
Minor						<b>Green:</b>	Lead Supervisor and affected workers

#### 1. Mobile Equipment

- Y or N Will mobile equipment be used?  
If no, continue to section 2.
- Y or N Has pedestrian traffic been diverted?
- Y or N Is temporary/permanent segregation in place between mobile equipment/ pedestrians
- Y or N Have all loads been evaluated?
- Y or N Have all areas been evaluated? (cranerails, slopes, edges)

#### 2. Lock Out Tag Out

- Y or N Will LOTO be necessary?  
If no, continue to section 3.
- Y or N Does a procedure currently exist?
- Y or N Has a LOTO permit been filled out and approved by a supervisor
- Y or N Has power been isolated at main source?
- Y or N Will re-energization be verified?

#### 3. Hot Work Activities

- Y or N Will Hot Work activities be needed?  
If no, continue to section 4.
- Y or N Has a Hot Work Permit be issued?
- Y or N Have we addressed all potential fuels, ignitables, flammables and combustibles?

#### 4. Conveyance & Storage of Materials under Pressure

- Y or N Will work be done on or near pressurized systems?  
If no, continue to section 5.
- Y or N Will heat be introduced to the area?
- Y or N Will vented pressure be kept away from work area?
- Y or N Will a Line-Break permit be needed?

#### 5. Confined Spaces Entry

- Y or N Will Confined Space Entry be required?  
If no, continue to section 6.
- Y or N Can the space be re-classified?
- Y or N Has a permit been filled out and approved by a supervisor?
- Y or N Is everyone authorized in confined space entry?
- Y or N Have emergency procedures been developed?
- Y or N Is air monitoring equipment in working order and calibrated?

#### 6. Working at Heights

- Y or N Will any elevated work be performed?  
If no, continue to section 7.
- Y or N Will handrails and catwalks be used?
- Y or N Can three points of contact be maintained?
- Y or N Have tie off points been identified and approved?
- Y or N Will all fall protection equipment been inspected?
- Y or N Is everyone authorized for this task?
- Y or N Are there any collision/common moving equipment pathways that could cross? If Y, eliminate equipment

Y or N Will equipment be used to lift material?  
If no, continue to section 8.

Y or N Will all lifting equipment be inspected prior to?

Y or N Are lifting devices rated and within safe working limits?

Y or N Has a floor layout (Safe Lift Zone) been established?

Y or N Has light of sight been evaluated?

Y or N Has tag line lengths and hook men identified?

Y or N Will rigging comply with Federal Law - (no choking, knots)

Y or N Will all lifting equipment be inspected prior to?

Y or N Are lifting devices rated and within safe working limits

Y or N Has a floor layout (Safe Lift Zone) been established?

Y or N Has light of sight been evaluated?

Y or N Has tag line lengths and hook men identified?

Y or N Will rigging comply with Federal Law - (no choking, knots)

Y or N Have all tools been identified and inspected?

Y or N Has everybody received the appropriate training?

Y or N Has "Hand Placement" during work been addressed?

Y or N Have all tools been identified and inspected?

Y or N Has everybody received the appropriate training?

Y or N Has "Hand Placement" during work been addressed?

Y or N Are there any specific PPE requirements?

Y or N Is PPE in good condition (holes in gloves, clean faceshields)?

Y or N Has everybody received appropriate training?

Y or N Does everybody understand what PPE is required?

Y or N Are there any specific PPE requirements?

Y or N Is PPE in good condition (holes in gloves, clean faceshields)

Y or N Has everybody received appropriate training?

Y or N Does everybody understand what PPE is required?

Y or N Are underground or overhead utilities an issue?  
If no, continue to section 9.

Y or N Have all utilities been identified?

Y or N Have all utilities been isolated?

Y or N If lifting, has a pre-lift safety meeting been done?

Y or N Have ground and weather conditions been assessed?

Y or N Has all traffic been diverted? (pedestrians too)

Y or N Have all utilities been identified?

Y or N Have all utilities been isolated?

Y or N If lifting, has a pre-lift safety meeting been done?

Y or N Have ground and weather conditions been assessed?

Y or N Has all traffic been diverted? (pedestrians too)

Y or N Will any guarding be removed or modified?

Y or N Will E-stops, cords, lights be removed or modified?

Y or N Will there be a pre-start up review?

Y or N Will any guarding be removed or modified?

Y or N Will E-stops, cords, lights be removed or modified?

Y or N Will there be a pre-start up review?

List all PPE required for this task: \_\_\_\_\_

[illegible]

### Action Necessary

## Who

When

General Manager:	_____	Additional Mgt Employee:	_____
Plant Manager:	_____	Additional Hourly Employee:	_____
Lead Supervisor:	_____		
Affected Employees:	_____	_____	_____
			_____
	_____	_____	_____

General Manager: \_\_\_\_\_

Additional Mgt Employee: \_\_\_\_\_

Plant Manager: \_\_\_\_\_

Additional Hourly Employee: \_\_\_\_\_

Lead Supervisor: \_\_\_\_\_

Affected Employees:

\_\_\_\_\_

[illegible]

Y or N	Did we capture all of the Hazards?
Y or N	Was the level of employee involvement appropriate?
Y or N	Were the controls adequate?
Y or N	Should we develop a VOP for this task?

Y or N Did we capture all of the Hazards?

Y or N Was the level of employee involvement appropriate?

Y or N Were the controls adequate?

Y or N Should we develop a VOP for this task?

Revised: 12/02/2020