



## Safety Tailgate Meeting | Week of June 4<sup>th</sup>, 2018

Project Name: \_\_\_\_\_

Job Number: \_\_\_\_\_

☐ Sheet Metal ☐ Piping ☐ Plumbing ☐ Start-Up

GF/Foremen: \_\_\_\_\_

Discussion Leader: \_\_\_\_\_

Date of Meeting: \_\_\_\_\_

### First Response to Injuries

The first person to see an injury is commonly referred to as the first responder. Typically, they administer first aid and contact proper emergency services. First aid is the immediate care given to injured or suddenly ill person or persons. It needs to be stressed that it is the immediate care, which means that you need to know what to do when such an occasion arises. Before you attempt to give any first aid, always be sure you have taken a moment to check the area for any hazards. Once you have done this and determined it is safe for you to help the victim, proceed. Do a quick check, if the person is breathing, talk to the victim, check for their responsiveness.

- If the injury is life threatening call 911 or the local emergency number in your area as soon as you know that you have an emergency. First aid is only the immediate help given until professional help arrives.
- If the injury is not life threatening, On-Site Health & Safety may be called to provide basic first aid to the victim. Check to see if emergency phone numbers are located in a visible area.
- There are three important things to remember – your ABC's! "A" is for airway, make sure the airway is open. "B" is for breathing, make sure the victim is breathing (look, listen, and feel for air). "C" is for circulation. In other words, is the heart beating? Check for a pulse. If the person is unconscious and does not have a pulse, you will need to start CPR, if qualified.
- If the victim is bleeding, cover the wound and apply direct pressure.
- Know where the first aid kit is located. Check the kit on a regular basis to see that you have plenty supplies available for emergencies. To replenish your first aid kit, contact the tool room.
- In the event of any injury on the job site, contact the safety department.

**Safety Comments/Suggestions for this Project:** \_\_\_\_\_

Print Name & Clock #	Print Name & Clock #	Print Name & Clock #
1 _____	7 _____	13 _____
2 _____	8 _____	14 _____
3 _____	9 _____	15 _____
4 _____	10 _____	16 _____
5 _____	11 _____	17 _____
6 _____	12 _____	18 _____
Foreman's Name & Clock #: _____		

**W = Correct Within One Week**

## PRE TASK PLAN

Project Name: \_\_\_\_\_

Job Number: \_\_\_\_\_

Sheet Metal    Piping    Plumbing    Service

GF/Foreman: \_\_\_\_\_

Pre-Task Plan Prepared By: \_\_\_\_\_

Date: \_\_\_\_\_

Project Safety Contact: \_\_\_\_\_

Safety Contact Phone Number: \_\_\_\_\_

1. Required PPE	Hazards	Safe Plan of Action (SPA)	
Hard hat                      Safety glasses Face shield                  Goggles	<b>Material Handling</b>	Inspected movement path    Identified moving equipment    Wheels Chocked Floor Plating (pinch / back)    Hand protection required Awkward size/shape/CG    Hand / body positions to avoid injury Laydown area established    Spotter    Debris Removal plan	
Gloves:    Leather    Kevlar / Cut resistant Solvent    Acid Arm sleeves    Fire resistant		<b>Slips, Trips, Falls</b>	Inspect for trip / slip hazards    Area clean / clear of debris    Hazards marked Tools & material properly stored    Electrical / emergency equipment clear
Boots    Steel - toe    Toe covers Ear Plugs / Ear muffs Safety Vest Chemical Resistant suit / apron / tyvek suit Respirator Fire Resistant			<b>Hand &amp; Power Tools</b>
<b>2. Fall Protection</b> Ladder inspection completed Retractable Device Required Inspected Fall Protection Equipment Shock Absorbing Lanyard Required Horizontal Lifeline System Required Anchorage Point Identified Fall Clearance Distance Adequate Fall Rescue / Retrieval Plan Set Up		<b>Chemical Hazards</b>	
<b>3. Task Specific Work Plans</b> Lifting Plan (required for greater than 50 lbs.) Floor / Wall penetrations Lock Out / Tag Out Procedures	<b>Non-Electrical Hot Work</b>		Fire Extinguishers    Fire watch    Install weld / spark screens Combustible material removed / protected    Adequate ventilation
			<b>Crane or other Lifting Equipment</b>
<b>4. Required Work Permits</b> Hot Work (Non-Electrical) Confined Space Excavation Energized Electrical Work (EEW) Critical Lift (Crane) Scaffolds	<b>Barricades</b>	Yellow (Caution) Barricade tape    Red (Danger) Barricade tape (label barricade) Rigid barricade required / secured to floor    Emergency egress clearly marked Barricade signage    Travel paths barricaded / cones to protect foot traffic	
		<b>Weather</b>	Review plans for weather including heat / wind / moisture    Liquids available Cool down periods    Sun Screen    Heat Stress symptoms
<b>Construction Activity (In Sequence)</b>	<b>Crew Congestion or Impact to occupants</b>		Public Protection, Explain: _____ Inspected areas for potential impacts to other crews / customers Coordinated with adjacent work supervisor / customer    Traffic barricades
		<b>Safety Huddle Topics:</b>	<input type="checkbox"/> <b>Monday:</b> _____ <input type="checkbox"/> <b>Tuesday:</b> _____ <input type="checkbox"/> <b>Wednesday:</b> _____ <input type="checkbox"/> <b>Thursday:</b> _____ <input type="checkbox"/> <b>Friday:</b> _____
<b>Construction Activity (In Sequence)</b>	<b>Hazards Identified</b>		<b>Corrective Actions Taken</b>
<b>Crew Sign-in (PLEASE PRINT NAME &amp; Clock Number):</b>			
1. _____	6. _____	11. _____	
2. _____	7. _____	12. _____	
3. _____	8. _____	13. _____	
4. _____	9. _____	14. _____	
5. _____	10. _____	15. _____	
<b>Daily Initials:</b>			
Monday	_____		
Tuesday	_____		
Wednesday	_____		
Thursday	_____		
Friday	_____		

*IF WORK CONDITIONS CHANGE, PRE-TASK PLAN NEEDS TO BE UPDATED ASAP*