



Safety Tailgate Meeting | Week of June 25th, 2018

Project Name: _____

Job Number: _____

☐ Sheet Metal ☐ Piping ☐ Plumbing ☐ Start-Up

GF/Foremen: _____

Discussion Leader: _____

Date of Meeting: _____

Opioid Abuse

Opioids cause mental impairment which leads to increased risk of falling or having an accident, especially when using tools, machinery, or vehicles. Opioids are prescription painkillers. Some of the more common opioids include: Morphine, Oxycodone (such as Oxycontin and Percocet), Hydrocodone (such as Vicodin and Zohydro), and Methadone. These drugs are highly addictive and their use in the workplace can be very dangerous.

Some staggering statistics are that nearly 30% of all Emergency Room (ER) visits result in a prescription for an opioid. About 60% of patients who visit the ER with back pain and 35% of patients who visit their primary care doctors for back pain receive prescription opioids. This shows that opioid use is very common despite the American Academy of Neurology recommending against the use of these painkillers for back pain or headaches.

In most cases, acute pain (pain lasting less than 3 months) can be relieved more effectively and efficiently with a combination of two over-the-counter pain medicines as follows: 200 mg of ibuprofen and 500 mg of acetaminophen. There is also no evidence that opioids are effective for treatment of chronic pain (pain lasting more than 3 months).

SAFE WORK PRACTICES

- Avoid using opioids, especially for back pain or headaches.
- Ask your doctor about using alternative medications, such as ibuprofen and acetaminophen. Both are available in prescription doses.
- If you must use an opioid, such as immediately after an extensive surgical procedure, consult with your doctor about getting off the opioid as soon as you possibly can.

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



Audited by:
Date:

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 Face shield Goggles Gloves: Leather Kevlar / Cut resistant Solvent Acid Arm sleeves Fire resistant Boots Steel - toe Toe covers Ear Plugs / Ear muffs Safety Vest Chemical Resistant suit / apron / tyvek suit Respirator Fire Resistant	Material Handling Slips, Trips, Falls Hand & Power Tools Chemical Hazards	Inspected movement path Floor Plating (pinch / back) Awkward size/shape/CG Laydown area established Identified moving equipment Hand protection required Hand / body positions to avoid injury Spotter Debris Removal plan Area clean / clear of debris Hazards marked Electrical / emergency equipment clear Reviewed safety requirements Guarding OK Inspected condition GFCI in use Identified PPE required Inspected electrical cord Routed cord overhead or taped / barricaded Area inspected for potential chemical hazard MSDS Sheet available Identify PPE for highest recognized hazard (see left side) Reviewed Decon / Disposal or storage procedures Reviewed contingency plan and equipment is on hand
2. Fall Protection 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	Non-Electrical Hot Work Crane or other Lifting Equipment Barricades	Fire Extinguishers Fire watch Install weld / spark screens Combustible material removed / protected Adequate ventilation Lifting / Rigging equipment inspected Tag lines in use Areas barricaded Overhead utility clearance verified Signalman assigned 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
3. Task Specific Work Plans Lifting Plan (required for greater than 50 lbs.) Floor / Wall penetrations Lock Out / Tag Out Procedures	Weather Crew Congestion or Impact to occupants	Review plans for weather including heat / wind / moisture Liquids available Cool down periods Sun Screen Heat Stress symptoms Public Protection, Explain: Inspected areas for potential impacts to other crews / customers Coordinated with adjacent work supervisor / customer Traffic barricades
4. Required Work Permits Hot Work (Non-Electrical) Confined Space Excavation Energized Electrical Work (EEW) Critical Lift (Crane) Scaffolds	Safety Huddle Topics:	<input type="checkbox"/> Monday: _____ <input type="checkbox"/> Tuesday: _____ <input type="checkbox"/> Wednesday: _____ <input type="checkbox"/> Thursday: _____ <input type="checkbox"/> Friday: _____
Construction Activity (In Sequence)	Hazards Identified	Corrective Actions Taken
Crew Sign-in (PLEASE PRINT NAME & Clock Number):		
1.	6.	11.
2.	7.	12.
3.	8.	13.
4.	9.	14.
5.	10.	15.
Daily Initials:		
Monday		
Tuesday		
Wednesday		
Thursday		
Friday		

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