## **APPENDIX 'G'**

## MANITOBA HYDRO JOB PLAN-ENGINEERING AND CONSTRUCTION

0298D/f Rev 19 05 v2.03

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## JOB PLAN - ENGINEERING & CONSTRUCTION Underground Construction - Winnipeg

1. EMERGENCY RE	SPONSE PL	.AN					
Identify exact location	n for emergend	y response:	Emergency phon	e numbers:	Dispate	ch - Daytime - Local (	CSC
			911		After h	ours - Electric 204-36	60-2006 Radio #031
			204-360-HELP (43	357)			60-2009 Radio #030
How will you execute a rescue?					04 474 2227	Blowing Gas - Wpg	
				369, 204-474-3007, 2	204-474-3327	Blowing Gas - Rura	al 1-888-624-9376
			VHF: 040			0	
			Spill Response no	o./FSO: Jeff Breakey	/ - 204-871-200	3	
				<u> </u>			
	y mm dd	<b>ss and review the jo</b> Project name	b plan with the Work Order no.		henever a cl	hange is introduce	ed to the job.
2. CURRENT YYY	y min uu	Project name		Description			
DATE							
CSC and Radio Chan	nel Line or fee	eder Blocked	Upstream prote	ctive device Blockin	g received from	n Time F	Phone no.
		Yes No					
3. HAZARD IDEN				r			
1. Mechanical		2. Electricity		3. <b>G</b> ravity		4. Applicable	
1.1 Equipment fai	ilure	2.1 Live contact I		3.1 Falling fron	n a height	4.1 Vehicular	
1.2 Lifting with a l	nooc	2.2 Live contact I		3.2 Falling obje	ects	4.2 Kenetic	
_		2.3 Induction/bac		3.3 Falling stru	ictures	4.3 Thermal	
1.3 Max work load		2.4 Induction/bac		_		4.4 Chemical	
1.4 Vehicle stabil	ity	2.5 Static charge		3.4 Rigging fail	lure	4.5 Confined Space	ce
1.5 Moving parts/	Sharp objects	2.6 Step potentia		3.5 Working ov	ver water	4.6 Excavations	
1.6 Tension loads		2.7 ARC Flash po		-		4.7 Vehicle or pedestrian traffic	
	soprings	2.8 Clothing igniti				4.8 Underground	Utilities
		FRC required				4.9 Other, specify	:
		2.9 Lockout/Tago	ut			4.9.1	
					I		
Hand contact:	Incident energ	у -	ARC flash bound	dary -	ARC	Flash PPE Level -	
Hot stick Work:	Incident energ	y -	ARC flash bound	dary -	ARC	Flash PPE Level -	
					PPE: Minimum H	lard Hat and Safety Foot DTHER REQUIRED PPE	twear
4. JOB STEPS			MAJOR		LIST ALL C	DTHER REQUIRED PPE cluding eyewear.	
			HAZARDS	S BARRIERS	FRC: Yes		(LO/TO)
	REVIEWED BY						

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5. HAVE WE CONSIDERED (It is critical that we make note of any changes that may occur during the work cycle)							
People	Procedures	Hardware/Equip	nent	Environment	Workers Affect on Environment		
Qualification of personnel         Other work groups/ contractors         Effective         Communication         Worker fatigue         Pedestrian control         General public         Traffic control         Safety watcher	Limits of approach De-energize/Isolation of apparatus Safety hold off/ Blocking required Switching orders Adequate cover-up Grounding apparatus and vehicles Work permit/ Clearance to work Permit checklists (soft dig, confined space, etc.) Review rescue procedures Spiking/Stethoscoping Cut Hazards/Cut Resistant Gloves		tools & PPE vehicles structures r rigging /er-up pools -	<ul> <li>Environment checklist</li> <li>Underground locates</li> <li>Weather conditions</li> <li>Soil conditions/Shoring</li> <li>Lighting conditions</li> <li>Adjacent structures/ Vegetation</li> <li>Housekeeping</li> <li>Emergency plan/ procedure</li> <li>Open excavations/ Trench</li> <li>Distractions and Interuptions</li> </ul>	Cause erosion Release/spills (liquids/gases/solids) Waste disposal liquids/solids) Noise Fire Species at risk (plant and animal) Disturbing waterways/ drainage/wetlands/ burial grounds Wildlife Habitat Bio Security		
WHAT ARE THE CHANGES?				HOW WILL THIS AFFECT	YOUR WORK?		

6. HUMAN ERROR REDUCTION TOOLS (Consider which HER Tools you need to safely execute task or Critical Steps)						
Stop When Unsure / Know When to Stop Stop when unclear on task / outcomes	Procedure Use and Adherence Verify correct / accurate procedure	Self Check STAR Stop / Think / Act / Review				
Questioning Attitude Identify confusion / doubt / uncertainty	Effective Communication Send message / paraphrase back / acknowledge					

## 7. PERSONS WORKING ON THE JOB

Designated person in charge (Print Name):		Crew cell no.:	Designated person in charge (Signature):	yyyy mm dd Date:
Print Full Names members:	and classification of crew			
yyyy mm dd		Initial/Sig	gn off for Tailboard Discuss	sion

8. OTHER CREWS AND VISITORS Be aware of all work crews in the ar		Multi-crew job coordinator	Cell phone:
WHAT OTHER CREWS ARE ON SITE	PER	SON IN CHARGE	HOW WILL THEIR JOB AFFECT YOURS

Any visitors to your site shall read and sign your Plan.

WORKSITE VISITOR SIGN OFF	DATE yyyy mm dd	WORKSITE VISITOR SIGN OFF	DATE yyyy mm dd