APPENDIX ‘E’

SAMPLE JOB PLAN

Manitoba Hydro

JOB PLAN - ENGINEERING & CONSTRUCTION
Underground Construction - Winnipeg

1. EMERGENCY RESPONSE PLAN

Identify exact location for emergency response:

How will you execute a rescue?

Emergency phone numbers:

911
204-360-HELP (4357)
SCC: 204-474-3369, 204-474-3007, 204-474-3327
VHF: 040
Spill Response no./FSO: Jeff Breakey - 204-871-2003

Dispatch - Daytime - Local CSC
After hours - Electric 204-360-2006 Radio #031
- Gas 204-360-2009 Radio #030
Blowing Gas - Wpg. 204-480-5900
Blowing Gas - Rural 1-888-624-9376

INSTRUCTION: Prepare, discuss and review the job plan with the crew daily and whenever a change is introduced to the job.

2.	CURRENT DATE	yyyy mm dd	Project name	Work Order no.	Description

CSC and Radio Channel	Line or feeder	Blocked	Upstream protective device	Blocking received from	Time	Phone no.
		☐ Yes ☐ No				

3. HAZARD IDENTIFICATION LIST

1. **M**echanical	2. **E**lectricity	3. **G**ravity	4. **A**pplicable
1.1 Equipment failure	2.1 Live contact HV	3.1 Falling from a height	4.1 Vehicular
1.2 Lifting with a boom	2.2 Live contact LV	3.2 Falling objects	4.2 Kenetic
1.3 Max work loads	2.3 Induction/backfeed HV	3.3 Falling structures	4.3 Thermal
1.4 Vehicle stability	2.4 Induction/backfeed LV	3.4 Rigging failure	4.4 Chemical
1.5 Moving parts/Sharp objects	2.5 Static charge	3.5 Working over water	4.5 Confined Space
1.6 Tension loads/Springs	2.6 Step potential		4.6 Excavations
	2.7 ARC Flash potential		4.7 Vehicle or pedestrian traffic
	2.8 Clothing ignition hazard/ FRC required		4.8 Underground Utilities
	2.9 Lockout/Tagout		4.9 Other, specify:
			4.9.1 _____

Hand contact:	Incident energy -	ARC flash boundary -	ARC Flash PPE Level -
Hot stick Work:	Incident energy -	ARC flash boundary -	ARC Flash PPE Level -

4. JOB STEPS	MAJOR HAZARDS	REQUIRED BARRIERS	PPE: Minimum Hard Hat and Safety Footwear LIST ALL OTHER REQUIRED PPE including eyewear. FRC: ☐ Yes ☐ No	TIMES (LO/TO)

REVIEWED BY	DATE yyyy mm dd

5. HAVE WE CONSIDERED (It is critical that we make note of any **changes** that may occur during the work cycle)

People	Procedures	Hardware/Equipment	Environment	Workers Affect on Environment
☐ Qualification of personnel	☐ Limits of approach	☐ Inspection of equipment	☐ Environment checklist	☐ Cause erosion
☐ Other work groups/ contractors	☐ De-energize/Isolation of apparatus	☐ Inspection of tools & PPE	☐ Underground locates	☐ Release/spills (liquids/gases/solids)
☐ Effective Communication	☐ Safety hold off/ Blocking required	☐ Inspection of vehicles	☐ Weather conditions	☐ Waste disposal liquids/solids)
☐ Worker fatigue	☐ Switching orders	☐ Condition of structures	☐ Soil conditions/Shoring	☐ Noise
☐ Pedestrian control	☐ Adequate cover-up	☐ Safe loads for rigging	☐ Lighting conditions	☐ Fire
☐ General public	☐ Grounding apparatus and vehicles	☐ Adequate cover-up	☐ Adjacent structures/ Vegetation	☐ Species at risk (plant and animal)
☐ Traffic control	☐ Work permit/ Clearance to work	☐ Specialized tools - calibrated/tested & up-to-date	☐ Housekeeping	☐ Disturbing waterways/ drainage/wetlands/ burial grounds
☐ Safety watcher	☐ Permit checklists (soft dig, confined space, etc.)		☐ Emergency plan/ procedure	☐ Wildlife Habitat
	☐ Review rescue procedures		☐ Open excavations/ Trench	☐ Bio Security
	☐ Spiking/Stethoscoping		☐ Distractions and Interuptions	
	☐ Cut Hazards/Cut Resistant Gloves			

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): _____ Date: yyyy mm dd _____

Print Full Names and classification of crew members:

yyyy mm dd	Initial/Sign off for Tailboard Discussion

8. OTHER CREWS AND VISITORS

Be aware of **all** work crews in the area.

Multi-crew job coordinator _____ Cell phone: _____

WHAT OTHER CREWS ARE ON SITE	PERSON 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