Pre-Task



Header

 Submission ID
 192929
 Submission Date
 2024-04-05 09:42:22

Form Created Date 2024-04-05 09:39:28 Date 2024-04-05

 Submitted By
 Lachapelle, Rob-Admin
 Supervisor
 Lachapelle, Rob-Admin

Site Bachelor Lake Mine Department/Job TG219026

Area/Level Surface Workplace Testing PD-1473

Shift Days

Pre-Task Assessment

| Assigned Tasks to be Performed | Testing PD-1473 |
|--------------------------------|-----------------|
| Workplace Score | 1 |
| Job Definition Score | 1 |
| Experience Score | 1 |

Worst Case Scenario

| List the worst thing that can happen to you or your coworkers at your workplace | Testing PD-1473 |
|---|-----------------|
| What are you doing about it? | Testing PD-1473 |

Safety Checks

| Why are you BEING SAFE? | Testing PD-1473 |
|---|-----------------|
| Is the travelway in good order? | N/A |
| Is the housekeeping in good order? | N/A |
| Is the ventilation in good order? (Condition, Volume, Quality) | N/A |
| Is dust control in good order? | N/A |
| Are ground conditions in good order? | N/A |
| Are communication tools in good order? (radio, telephone etc.) | N/A |
| Are the signs and barricades in good order? | N/A |
| Are your hand tools in good order? | N/A |
| Do you require/have locks and tags? | N/A |
| Do you have the proper PPE? | N/A |
| Do you have a hot work permit? | N/A |
| Do you have the SDS for the chemicals you are using? | N/A |
| Will you be working at heights and require a rescue plan? Or do you require a travel restraint? | N/A |
| Are you registered for Working Alone? | N/A |
| Do you have the prints, procedures or risk assessments for your work? | |
| Have you communicated with the mobile equipment operators in the area? | N/A |
| Comments | Testing PD-1473 |
| I am committed to working safety! | Yes |
| Supervisor Comments | Testing PD-1473 |

Start State Details

None

Start State Pictures of the Workplace

2022-10-07 08:11:51



2022-10-27 14:50:03



2023-09-13 07:42:31



2022-10-19 08:52:10



2023-01-25 20:18:35



2022-05-06 07:13:19



2022-11-11 09:25:37



2022-09-27 09:04:31



2022-10-21 06:22:41



2023-01-17 14:05:18



2022-09-27 09:05:26



2023-10-27 16:42:00



End State Details

Testing PD-1473

End State Pictures of the Workplace

























Signatures

| Supervisor Signature | Manager Signature | Other Signature |
|----------------------|---------------------|---------------------|
| 2024-04-05 09:42:22 | 2024-04-05 09:42:22 | 2024-04-05 09:42:22 |
| f. | | |

Review

End of Shift Review

2024-04-05 09:42:22

Report Distribution

Reviewers

| Name Position | Date |
|---------------|------|
|---------------|------|

No Data Available