

SAFE PLAN OF ACTION

Safety starts with a plan



An tÚdarás Sláinte agus Sábháilteachta
Health and Safety Authority

SAFE PLAN OF ACTION

Date: / /

STEP 1 – TASK INFORMATION

Task: Supervisor:
 Company: Supervisor Contact No.:
 Location: Rams No.:

EMERGENCY PROCEDURES

Fire Equipment Assembly Point First Aid
 Emergency Contact Other:

STEP 2 – PERMITS

Dig Permit Electrical / Live Services
 Confined Space Other:
 Hot Works

STEP 3 – PERSONAL PROTECTIVE EQUIPMENT

Safety Helmet Safety Gloves Eye Protection
 Face Protection Safety Boots Ear Protection
 High Vis Vest Respiratory Protection Safety Harness

STEP 4 – TASK RISK ASSESSMENT

a) DESCRIPTION OF TASK

b) HAZARDS How can it go wrong?

Moving Plant Lifting Operations Live Services
 Work at Height Hazardous Materials Pedestrians
 Slips, Trips and Falls Fire Adverse Weather
 Manual Handling Hand Tools Pinch Points
 Dust and Fumes Electrical Tools/Systems Line of Fire
 Excavations Noise Hazard Simultaneous Works

c) CONTROLS What is the plan to do it safely? List the control measures.

Plant and Equipment to be used:
 Additional Hazards:

STEP 5 – SAFE PLAN OF ACTION SIGN OFF

CREW SIGN OFF

Signature	Print Name
<i>Joe Bloggs</i>	JOE BLOGGS

SUPERVISION SIGN OFF

Person(s) Responsible for Managing and Supervising Work

Mon	Tue	Wed
Thu	Fri	Sat
Sun		

Translator Sign Off: Language Used: Translator Contact No.:

Safety Advisor/Officer (where required): PSCS Supervisor/Supervisor Representative for the PSCS:

Logos: CONGRESS, CONSTRUCTION INDUSTRY FEDERATION, HSA



‘Learning from industry to educate and improve health, safety and well-being for all working in construction’



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STEP 1 – TASK INFORMATION

Task

Company

Location

Supervisor

Supervisor Contact No.

Rams No.

EMERGENCY PROCEDURES

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Emergency Contact

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a) DESCRIPTION OF TASK

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Plant and Equipment to be used

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b) HAZARDS How can it go wrong?

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Work at Height Hazardous Materials Pedestrians

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Excavations Noise Hazard Simultaneous Works

Additional Hazards

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c) CONTROLS What is the plan to do it safely? List the control measures.

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STEP 5 – SAFE PLAN OF ACTION SIGN OFF

CREW SIGN OFF

Signature	Print Name
1 <i>Joe Bloggs</i>	JOE BLOGGS
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SUPERVISION SIGN OFF

Person(s) Responsible for Managing and Supervising Work

Mon Tue Wed

Thu Fri Sat Sun

Translator Sign Off Language Used Translator Contact No.

Safety Advisor/Officer (where required) PSCS Supervisor/Supervisor Representative for the PSCS

STRONGER TOGETHER CONGRESS Irish Congress of Trade Unions

CONSTRUCTION INDUSTRY FEDERATION

HSA An tÚdarás Sláinte agus Sábháilteachta Health and Safety Authority

STEP 1 – TASK INFORMATION

This section details the specific information relevant to the task for the day/week.

Date – Date the Safe Plan of Action (SPA), the first day works commenced. A SPA can be for one day or for the duration of a working week (Monday to Friday) once the task and location remain the same. It is advised that a new SPA be completed for Saturday works and again for Sunday works.

Task – Detail the name of the task taking place. Example: The overall task may be to install underground services, however the task may be excavating the trench for the purpose of service duct install.

Company – Name the company completing the task or works.

Location – Be specific about the location of works. The site name alone may not be sufficient. Examples: Identify if you are working in a particular room, level, gridline, road, address, eircode, etc.

Supervisor – Name of the supervisor and their contact number. The supervisor must always be contactable and available to the task crew when needed. The supervisor must ensure all operatives are briefed on the RAMS and the corresponding SPA. The SPA must be checked daily by the supervisor to ensure no changes. Minor modifications can be added to the SPA during the week, but where changes are so significant a new SPA may be required.

Where the SPA is linked to a RAMS and where changes tend to go outside the scope of works covered in the RAMS, the works must stop, the task revised and RAMS updated to reflect these changes. Operatives must be briefed on the new RAMS revision and a corresponding SPA completed.

RAMS Number – Where applicable, note the RAMS identification number. This links the SPA and RAMS documents.

Emergency Response – Consider the emergency response requirements for the task. Additional emergency response requirements which is specific to the task should be outlined in Section 4, Controls.

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for Safe Plan of
Action Training



STEP 2 – PERMITS

Select permits relevant to your task. Detail in 'Other' any additional permits in place for the task.

STEP 3 – PERSONAL PROTECTIVE EQUIPMENT

Select PPE relevant to the task. Detail any additional PPE or specific PPE requirements. Example for Respiratory protection equipment (Disposal mask/ P3 Filter), sunscreen, chemical overalls, etc.

STEP 4 – TASK RISK ASSESSMENT

By outlining the sequence of your task first, you will be able to identify all hazards associated with your task and implement adequate control measures to remove or reduce the risk of harm or injury.

a) DESCRIPTION OF TASK

Describe briefly each step in sequence from start to finish to complete the task. For example, the task of erecting scaffolding would look something like below.

- 1 Off-load scaffolding from truck using a telehandler.
- 2 Set up works area.
- 3 Scaffolders to erect scaffolding using the safe assembly methods.

Plant and Equipment to be used

List the plant and equipment to be used on the task.

b) HAZARDS

A Hazard is a potential source of harm or adverse health effect on a person or persons. By using this section, it helps prompt common hazards associated with the task. Identify the hazards associated with each step. Tick all hazards associated with the task and list any additional hazards not provided.

- | | | | | | | | | |
|--------------------------|--|--------------------|--------------------------|--|-----------------|--------------------------|--|--------------|
| <input type="checkbox"/> | | Work at Height | <input type="checkbox"/> | | Manual Handling | <input type="checkbox"/> | | Pedestrians |
| <input type="checkbox"/> | | Lifting Operations | <input type="checkbox"/> | | Moving Plant | <input type="checkbox"/> | | Pinch Points |

Additional Hazards

- Materials falling from height.

c) CONTROLS

Control measures include actions that can be taken to reduce the potential exposure to the hazard. The control measure could be to remove the hazard or to reduce the likelihood of the risk of exposure to that hazard. When we look at control measures, we often refer to the hierarchy of control measures.

- 1 Loads adequately secured for transit. Material off-load with forks. No persons permitted in the area of off-loading. No persons permitted to access the flatbed of the truck. Spotter present to ensure no persons in the vicinity of offloading.
- 2 Area excluded with barriers and signage.
- 3 CSCS trained scaffolders. Scaffold components visually checked before use. Scaffold erected as per guidance. Harness, lanyard and 100% tie off when erecting scaffold.

STEP 5 – SPA SIGN OFF

All individual crew members involved in the task must sign the SPA verifying their understanding and agreement to work to the Safe Plan of Action.

SUPERVISION SIGN OFF

Supervisor – The supervisor signs the SPA each day the works is taking place. Every morning, the task supervisor to ensure that the works area is safe and the crew members are briefed on any updates. The supervisor shall ensure all control measures are still in place and assess the area for any potential new hazards due to environmental or task changes. Where changes are observed they must be added to the SPA. Where changes are so significant, the task should be stopped and the plan reviewed.

Translator – Where a translator is used to brief the crew on the SPA details, they must sign this section and note the language used for translation.

PSCS Supervisor/Supervisor Representative for the PSCS – Where appointed, the PSCS Supervisor should, upon review of the works, sign the SPA to confirm that it is safe (so far as is reasonably practicable) to allow the works to proceed / continue and that the information provided reflects local on-site conditions including the ongoing coordination / cooperation with other contractors.

Safety Advisor/Officer – Where applicable the Safety Advisor/Officer, when in attendance, must sign the SPA upon their inspection of works.

