

## HAZARD SPACE JOINT SAFETY MEETING (209B)

<b>1. Job Name:</b>	<b>2. Operational Period:</b> Date:     /     /								
Shift Start Time:									
Shift End Time:									
<b>3. Potential Meeting Topics:</b>									
_____									
Equipment/Line ID									
<p>I. Introductions &amp; Chain of Command</p> <ul style="list-style-type: none"> <li>• Hazard Space Name</li> <li>• Meeting Leader</li> <li>• Rescue Team</li> <li>• Safety Attendants</li> </ul> <p>II. 204A Communication Plan</p> <ul style="list-style-type: none"> <li>• COMMUNICATION PLAN, does everyone know how to contact rescue for non-emergency and emergency situations?                             <ul style="list-style-type: none"> <li>○ Code System</li> <li>○ Channels</li> </ul> </li> <li>• EVACUATION, considering wind direction, which route will you take to the muster point?</li> </ul> <p>III. 208B Site Safety &amp; Control Plan</p> <ul style="list-style-type: none"> <li>• ACCESS, is everyone involved qualified to perform the work competently and safely?</li> <li>• LOTO, are individual and group lock and tag policies understood? being followed?</li> <li>• JSA/JHA, has each craft conducted a hazard assessment for the job scope?</li> <li>• PPE, do you have everything you need to ensure the job is completed efficiently and incident free?</li> <li>• PERMIT, confirm job scope, confirm safeguards listed are in place.</li> <li>• INCIDENT ACTION PLAN, Self (recognize signs &amp; symptoms); External (proper harness usage); Internal (rapid assess/extraction)                             <ul style="list-style-type: none"> <li>○ Multi Confined Spaces, safety attendant &amp; entrant expectations understood?</li> <li>○ Critical Path Spaces, safety attendant &amp; entrant expectations understood?</li> </ul> </li> <li>• DEMOBILIZATION, inform rescue when the work in the hazard space is pausing/concluding; give the reason why; End of Shift / Weather / Safety / Other (lunch, shift roll over); secure space.</li> <li>• DEBRIEFING, in the event of a rescue, all affected personnel are required to participate following the termination of emergency operations for a brief post incident discussion.</li> </ul> <p>IV. OSHA Act of 1970</p> <ul style="list-style-type: none"> <li>• Right to Know</li> <li>• Right to Participate</li> <li>• Right to Stop Unsafe Work</li> </ul>									
<b>4. Post Entry Debrief:</b>									
<p>I. Entrants inform attendant(s) when/why workspace is pausing or concluding.</p> <p>II. Attendants or S/A Foreman inform rescue &amp; site operations when/why workspace is concluding:</p> <table style="width: 100%; border: none;"> <tr> <td><input type="checkbox"/> Lunch</td> <td><input type="checkbox"/> Other _____</td> <td>Break from _____</td> <td>Break until _____</td> </tr> <tr> <td><input type="checkbox"/> Weather</td> <td><input type="checkbox"/> Safety Issue</td> <td><input type="checkbox"/> Job Scope Complete</td> <td><input type="checkbox"/> End of Shift</td> </tr> </table> <p>III. Time stamp:     End Time: _____     Extended Until: _____     <input type="checkbox"/> Hot Shift Rollover</p> <p>IV. Secure space:     <input type="checkbox"/> Danger Sign     <input type="checkbox"/> Hard Barricade     <input type="checkbox"/> Soft Barricade</p> <p>V. Close permits with operations</p> <p>VI. Note any hazards that were created or confronted during entry</p>		<input type="checkbox"/> Lunch	<input type="checkbox"/> Other _____	Break from _____	Break until _____	<input type="checkbox"/> Weather	<input type="checkbox"/> Safety Issue	<input type="checkbox"/> Job Scope Complete	<input type="checkbox"/> End of Shift
<input type="checkbox"/> Lunch	<input type="checkbox"/> Other _____	Break from _____	Break until _____						
<input type="checkbox"/> Weather	<input type="checkbox"/> Safety Issue	<input type="checkbox"/> Job Scope Complete	<input type="checkbox"/> End of Shift						
<b>5. Post Emergency Debrief</b>									
<ul style="list-style-type: none"> <li>• All available job participants SHALL attend.</li> <li>• Review signs/symptoms of potential exposure hazard</li> <li>• Are personnel fit for duty/need recycle/rehab/medical?</li> <li>• Operational Readiness status of equipment?</li> <li>• What did each person do (did it work? / did it not work?)</li> <li>• Recap emergency event, objectives/tactics, assigned tasks, and incident termination.</li> <li>• Documentation required and steps remaining for mobilization.</li> </ul>									
<b>209B</b>	<b>RMP Page</b> _____								

**6. Meeting Participants**

See Permit for Names

*Signature confirms participant understands IPS recommendations for safe work practices based on hazards observed and emergency action plan in place.*

PRINT FOR ATTENDANCE

SIGN FOR AGREEMENT

	Company	Legal Name (Last, First)	Signature
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**7. Prepared by:**

Name: \_\_\_\_\_

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Position: \_\_\_\_\_