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| PO Box 299  Oberon NSW 2787  ABN 98 107 506 208 | Version | Author | Reviewed | Reference |
| B-Rev2 | SMS Work party | Committee | TB-001 |
| 23/04/2018 | | | |
| Tool Box Meeting - Blank | | | |

Document Status

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| Version | Date | Revision | Prepared | Reviewed | Approved |
| B-Rev1 | 15/05/2016 | 1 | SEC/TM |  |  |
| B-Rev2 | 10/04/2018 | 2 | SMS Working Party | Committee | 23/04/2018 |
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Revision Record

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| Revision | Date issued | Description of Changes |
| B-Rev2 | 10/04/2018 | Format change, incorporating TB-002 (PPE) and TB-004 (Emergency procedures) |
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Tool Box Meeting

TB-001

Team Leader\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Start time\_\_\_\_\_\_\_\_\_\_ Date\_\_\_\_\_\_\_\_\_\_\_

Work Location(s)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Planned Work or Tasks to be carried out on this day

* \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
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We will be working as a Team Yes / No (circle)

We will be using this equipment

* \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
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Identified Safety hazards prior to starting work

* \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
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Got the right PPE? (see below)

**Be seen, Be Safe, watch out for your team members**

**PPE required for today’s Work / Tasks**

**Tick what is required**

* Specifically, you:
  + must wear an approved Safety Vest at all times;
  + should wear solid gloves for most tasks and you SHOULD wear solid gloves and steel capped or solid foot protection when working on a track laying gang or when handling heavy equipment and hand tools.
  + must wear Safety Glasses when there is danger of flying sparks or chips or dangerous airborne particles;
  + must wear an approved Hard Hat when working closer than 5 metres from the operational area of machinery;
  + must restrain long hair if working with or near rotating machinery;
  + must wear hearing protection in a noisy environment (provided by OTHR)
  + may need respiratory protection (respirators, face masks, cartridge filters) in some environments;
  + may need body protection (aprons, safety harnesses) in some environments;
* Your team Leader will advise you if your PPE is acceptable.
* Remember, you cannot rely on PPE or administrative controls such as a job safety analysis to prevent injury. Be alert and watch out for potential hazards.

**Plan in advance:**

* Who has Fist Aid Training – identify that person?
* Know where the first kit is located
* Check somebody has a mobile phone or find where one is located
* Where are the scheduled access points for the worksite?
* Learn about Notifiable Occurrences and incident Reporting.

**Emergency procedures for the work site**

* If someone is injured, provide help as soon as possible.
* Administer First Aid.
* Take immediate steps to safeguard other workers and the public by removing them from the vicinity of the emergency.
* Notify the Team Leader.
* If necessary, contact 000 –

1. ask for Ambulance,
2. clearly describe where you are and how access is obtained to the site,
3. answer the operator’s questions,
4. report any dangers
5. report any actions
6. delegate somebody to meet the emergency vehicle

* *Any QUESTIONS or COMMENTS?   
  The Team Leader must record any questions or comments on the back of this form*

***Please sign that you have attended and that you understood the content of this meeting:***

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| --- | --- | --- | --- |
| **Name** | **Signature** | **Name** | **Signature** |
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