

# SAFE SYSTEM OF WORK PLAN (SSWP) & ROUTINE WORKS RISK ASSESSMENT (RA)

## SURVEY, SETTING OUT & SITE INSPECTIONS

Donegal County Council

Site Location		Start Date	
Weather Conditions		Temp °C	
Person Responsible	Worker Skills;	Contacts	
Number of Workers		1	
<b>Activity Type</b>		2	
Survey From vehicle <input type="checkbox"/>	Install Traffic Counter <input type="checkbox"/>		
Survey near water (Consider Specific Risk Assessment) <input type="checkbox"/>	Survey Manhole/Confined Space (Specific Risk Assessment Required) <input type="checkbox"/>		
Survey (In Live Carriageway) <input type="checkbox"/>	Other - Please Specify <input type="checkbox"/>	First Aider	
Survey (Off or On Edge of Carriageway) <input type="checkbox"/>			

Before work starts the following must be in place - tick the  circle when the control is in place

							Emergency Contact Numbers Available on Mobile Phone on Site <input type="checkbox"/>		Other <input type="checkbox"/>
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<b>RISK ASSESSMENT</b>	Risk assessment for activity without controls is	HIGH	MEDIUM	LOW
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**SELECT CONTROLS** All controls identified below must be in place before work starts. Tick the Box  to identify CONTROLS required; tick  when CONTROLS are in place

<b>PPE</b>											Other <input type="checkbox"/>
										Other <input type="checkbox"/>	
											<b>SPECIFIC RISK ASSESSMENT REQUIRED</b> <input type="checkbox"/>

	<b>SPECIFIC RISK ASSESSMENT REQUIRED</b> <input type="checkbox"/>	<b>NEVER ENTER A SPACE THAT IS CONSIDERED A CONFINED SPACE - SEEK ADVICE IF UNSURE</b>									
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					<b>Notes</b>						
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				Other <input type="checkbox"/>	Other <input type="checkbox"/>	Other <input type="checkbox"/>	Other <input type="checkbox"/>	Other <input type="checkbox"/>	Other <input type="checkbox"/>	Other <input type="checkbox"/>	Other <input type="checkbox"/>
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<b>RISK ASSESSMENT</b>	Risk assessment for activity with controls is	HIGH	MEDIUM	LOW
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Activities, Hazards and Controls Identified by;	Date	Time
Controls put in place by;	Date	Time

I have been made aware of the hazards and controls for this activity - Signed by;

TEAM:

Note: The list of Hazards and Controls is not exhaustive and is in no particular order

**IF IT IS NOT SAFE DON'T DO IT AND INFORM YOUR LINE MANAGER**