How to Start a Site Specific Safety Plan (SSSP)

- Subcontractor completes/submits the required SSSP plans and training records – which become attached to SSSP.
- 2. PM reviews/approves.
- 3. PM or designee coordinates additional review and approval.
- 4. After approval, PM provides to Procurement to provide Notice to Proceed.

Site Specific Safety Plan



ENVIRONMENT, SAFETY, HEALTH, AND QUALITY DIVISION

26 November 2013

Chapter 42: Subcontractor Safety

Site-specific Safety Plan Content and Approval Form

Product ID: 97 | Revision ID: 1575 | Date Published: 26 November 2013 | Date Effective: 26 November 2013 | URL: http://www-group.slac.stanford.edu/esh/eshmanual/references/subcontractorFormSSSP.pdf

This form is required for construction and high risk service projects. It is to be completed by the SLAC project manager (or designee) and the prime subcontractor. The SLAC project manager indicates the required documents and records (in the SSSP Required Contents, Hazardous Materials, and Training Records sections); the subcontractor attaches them when submitting the completed form. Once approved, these combined documents/records and related documents comprise the site-specific safety plan (SSSP) for this project. All approvals are needed before work may begin. Approved SSSPs are maintained at the work site.

For projects with sub-tier subcontractors, the prime subcontractor (1) ensures each sub-tier directly contracted to it completes an SSSP for its scope of work (the prime prepares a site-specific safety plan content and approval form for each sub-tier and then submits the separate SSSPs to SLAC for approval) and (2) completes a separate SSSP covering the work it self-performs, in addition to the SSSP that addresses the overall project. (See Subcontractor Safety. Non-green Work Procedure (SLAC-F30-0A21C-024!)

Project Name		PR#
SLAC Project Contact	S	
SLAC Project Manager		
Phone	Cell	E-mail
SLAC FCM / SM	·	•
Phone	Cell	E-mail
SLAC ESHQ Division Representative	8	
Phone	Cell	E-mail
Prime Subcontractor		
Company Name		
Superintendent / Foreman		
Phone	Cell	E-mail
Safety Representative (if required)		
Phone	Cell	E-mail
Sub-tier Subcontracto	r □ N/A	
oub tiel oubcontidete	1 100	
Company Name		
	on use <u>California License Classification</u>):	License #: 958011
License Classifications (if construction	n use <u>California License Classification</u>):	^{License #} 958011
License Classifications (if constructions) Superintendent / Foreman	on use <u>California License Classification</u>): Cell	License # 958011

SLAC-I-730-0A21J-025-R009

SLAC National Accelerator Laboratory Environment, Safety, Health, and Quality Division Chapter 42 | Site-specific Safety Plan Content and Approval Form

Project Activities

To be completed by subcontractor. Provide a brief overview of activities and equipment to be used. A more detailed list of job steps, hazards, and controls will be completed on the job safety analysis forms required for work planning and control once the work has begun.

Activity	Subcontractor Performing the Activity	Equipment to be Used

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Site Specific Safety Plan

SLAC National Accelerator Laboratory Environment, Safety, Health, and Quality Division Chapter 42 | Site-specific Safety Plan Content and Approval Form

SSSP Required Contents

Form	Required Initially	Required Later	Form	Required Initially	Required Later
Job Safety Analyses (by task)		V	Confined Space Entry Permit		
Demolition Plan			Fire Protection/Prevention Plan		
Traffic Control Plan			Hoisting and Rigging Plan		
Environmental Protection Plan: Spills and Release Prevention			CARB Registration Documentation for Portable Engines		
Storm Water Protection Plan			Elevated Surface Work Plan		
Dust Control Plan			Laser SOP or JSA		
Barricade / Signage Plan			Radiation Generating Devices Authorization		
Material / Equipment Staging Plan			Control of Hazardous Energy Plan		
Waste Disposal / Recycling Plan			Penetration Permit		
Electrical Work Plan			Other:		
Excavation Permit			Other:		
License(s)	\boxtimes		Sub-tier License(s)		

Hazardous Materials

List and attach safety data sheets (SDSs).

1	2	2.
3	4	4.

Training and Related Records

	ming and related records	
	Scissor / Boom Lift Operator	CPR / First Aid
	Fork Lift Operator	Control of Hazardous Energy (LOTO)
	Crane Operator	Electrician (California-certified journeyman)
	Permit Required Confined Space Entry (for entrants, attendants, and entry supervisor)	Electrical Worker – Qualified (employer letter asserting employee's knowledgeltraining per NFPA 70E 110.2 and 29 CFR 1910.332 (b))
V	Scaffolding	Laser Worker Safety (Class 3b and 4)
V	Scaffolding Competent Person	Laser Operator Training (Class 2 and 3a and 3R)
	Fall Protection	Explosive-actuated Tool Operation
	Fall Protection Competent Person	Respiratory Protection (training, fit test, and medically qualified)
	Excavation Competent Person	Asbestos Worker
	OSHA 30-hour Construction Safety (superintendant / foreman)	Hazwoper
	OSHA 30-hour Construction Safety (safety representative)	Other:
	Heat Illness Prevention	Other:

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SSSP Approval

Your signature below indicates you have reviewed the attached SSSP documents and records, agree that they adequately address controls for identified hazards and related requirements, and approve this SSSP.

Prime Subcontractor						
Superintendent / Foreman	Name	Signature X	Date			
Safety Representative (if required)	Name	Signature	Date			
Sub-tier Subcontractor						
Superintendent / Foreman	Name	Signature	Date			
Safety Representative (if required)	Name	Signature	Date			
SLAC						
SLAC Project Manager	Name	Signature	Date			
SLAC FCM / SM	Name	Signature	Date			
SLAC ESH Coordinator or ESHQ Division Representative	Name	Signature	Date			
SLAC Laser Safety Officer (only required for projects involving lasers)	Name	Signature	Date			

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Job Safety Analysis (JSA) by Contractor



ENVIRONMENT, SAFETY & HEALTH DIVISION

Chapter 2: Work Planning and Control

Job Safety Analysis Form

Product ID: 513 | Revision ID: 1262 | Date Published: 17 December 2010 | Date Effective: 17 December 2010

URL: http://www-group.slac.stanford.edu/esh/eshmanual/references/wpcFormJSA.pdf | .doc

Job / Activity Name:				JSA # (optional):	Start Date:	Valid Through:			
Department / Group Name: Bldg / Are		ea Location(s): Other Information or Reference		es:					
Scope of Wor	Scope of Work {reference attachment }								
Step Number	Step		Hazard		Control				
1.									
2.									
3.									
4.									
5.									
6.									
7.									
8.									
9.									
10.									

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Job Safety Analysis (JSA) by Contractor

	Signature	D-1-	
Name (print)	Signature	Date	
Authorizer (administrative or fun authorize them to perform the work.	actional supervisor, foreman, POC) I have reviewed the steps,	hazards and controls described in this JSA with all workers listed iate, and in full compliance with SLAC training requirements) to	
Authorizer (administrative or fun authorize them to perform the work.	actional supervisor, foreman, POC) I have reviewed the steps,	, hazards and controls described in this JSA with all workers listed	
Authorizer (administrative or fun authorize them to perform the work activity. Name (print) Area or Building Manager Rea and so on with the authorizer or liste	ictional supervisor, foreman, POC) I have reviewed the steps, . Workers are qualified (that is, licensed or certified, as appropri Signature d work? (if yes, document release via WIP and tailgate meeting)	hazards and controls described in this JSA with all workers listed iate, and in full compliance with SLAC training requirements) to	perform this
Authorizer (administrative or fun authorize them to perform the work activity. Name (print) Area or Building Manager Rea	Signature d work? (if yes, document release via WIP and tailgate meeting ed worker(s) and have coordinated this job with affected occupa	hazards and controls described in this JSA with all workers listed iate, and in full compliance with SLAC training requirements) to Date Date	perform this

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Construction Tailgate/ Release Form



Chapter 2: Work Planning and Control

Construction Tailgate / Release Form

Product ID: 516 | Revision ID: 1680 | Date Published: 30 September 2014 | Date Effective: 30 September 2014

ENVIRONMENT, SAFETY, HEALTH, AND

30 September 2014

This form is used with the Work Planning and Control: Daily Construction Work Review and General Contractor Release Form (SLAC-I-730-0A21J-055) to document release by the general contractor of sub-tier contractors, and by the SLAC field construction manager (FCM) of SLAC workers, on construction jobs. The form is to be completed by the general and sub-tier contractor designated representative (or FCM for SLAC workers) and workers being briefed; completed forms are maintained in the work package. (See Work Planning and Control; Work Planning and Control

Procedure [SLAC-I-720-0A21C-002	2].)				
Description / title of sub-tier work			Work location		
Sub-tier contractor name / work group			Date		
Sub-tier contractor designated representative			Cell phone		
SLAC FCM			Cell phone		
What are some critical steps or phases of today's work?					
What can go wrong?					
What can we do to prevent this?					
Permits / Plans in Effect	١ .	Inspection / Oversight / Certificat	ion / License		
None	1	Excavation inspection required and scheduled			
Confined Space Entry Permit	1	Scaffold inspection required and scheduled			
Construction Project Air Permit	1	Hot work fire watch required and scheduled			
Electrical Work Plan (EWP)		 Industrial hygiene monitoring/su 	strial hygiene monitoring/survey required and scheduled		
■ Elevated Surface Work Plan (ES	SWP)	Operators' licenses or certifications verified			
Energy Isolation Plan (CoHE)	- 14	Notes			
Excavation Permit	Ш				
Fire Protection Impairment	1	Additional Checks			
Hoisting and Rigging Plan		Plans for changing or extreme weather reviewed			
Hot Work Permit-Fire (flame or s	sparks)	Flaggers to control vehicle or pedestrian traffic understand duties			
Penetration Permit		Hazardous/non-hazardous waste disposal procedures understood and bins/containers in place			
Radiological Work Permit	1	Work coordinated within and between adjacent work groups			
Stormwater BMP		Workers are aware of potential impact and mitigation measures of adjacent work activities			
Other:	Other: Emergency procedures review				
Construction subcontractor notif	-	•			
· ·		ny's designated representative any l		•	
		ge being informed of the hazards ar		entified hazards brought to his or her attention. aciated with assigned work.	
Task Updates					

SLAC-I-730-0A21J-037-R003

SLAC National Accelerator Laboratory Environment, Safety, Health, and Quality Division Chapter 2 | Construction Tailgate / Release Form

Worker Acknowledgment

should I have questions or recogniz				controlled.	statiu i flav	e the authority to stop work,
Name (print)	Initial	Company Name (if different than page	ge 1)	Name (print)	Initial	Company Name (if different than page 1)
	10	YT ST	ΤΔ	RT WOR	K	
	ш	REIF	- Δ	SED BY	FC	· V 1
UIVI	11			OLD DI	ı	111
Release between General Contra	ctor and S	iub-tier Contractor D	Designa	ted Representatives		
Sub-tier contractor designated repre						
I have reviewed the items on page above listed workers before further					shared oth	er relevant information with
Name (print)		Signa	ature	×	Date	
General contractor designated repre	esentative					
The completed Daily Construction V relevant information from the SLAC						
Name (print)		Signa	ature	X	Date	
Dalassa hatusan Cl AC FOM and	Markana					

Release between SLAC FCM and Workers

A work integration plan, documenting area/building manager approval of this work, is in the work package. I have reviewed items on page 1 and discussed unique area hazards or other relevant information from a coordination meeting, as appropriate, and grant release to the above listed workers for this work. They are authorized and understand their authority and responsibility to stop work.

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Construction Tailgate/ Release Form

1ST TASK OF THE DAY	WHAT CAN HURT YOU?	HOW WILL YOU STAY SAFE?
2ND TASK OF THE DAY	WHAT CAN HURT YOU?	HOW WILL YOU STAY SAFE?
3RD TASK OF THE DAY	WHAT CAN HURT YOU?	HOW WILL YOU STAY SAFE?
4TH TASK OF THE DAY	WHAT CAN HURT YOU?	HOW WILL YOU STAY SAFE?
5TH TASK OF THE DAY	WHAT CAN HURT YOU?	HOW WILL YOU STAY SAFE?
6TH TASK OF THE DAY	WHAT CAN HURT YOU?	HOW WILL YOU STAY SAFE?

7TH TASK OF THE DAY	WHAT CAN HURT YOU?	HOW WILL YOU STAY SAFE?
8TH TASK OF THE DAY	WHAT CAN HURT YOU?	HOW WILL YOU STAY SAFE?
9TH TASK OF THE DAY	WHAT CAN HURT YOU?	HOW WILL YOU STAY SAFE?
10TH TASK OF THE DAY	WHAT CAN HURT YOU?	HOW WILL YOU STAY SAFE?
11TH TASK OF THE DAY	WHAT CAN HURT YOU?	HOW WILL YOU STAY SAFE?



