

Task: _____
 Location: _____
 Site: _____

Name: _____
 Date: _____
 Time: _____

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CCC 'PROTECTS YOUR LIFE'

FALL FROM HEIGHT

Fall Protection System Y N N/A

1. Is the working at height permit complete and have you read and signed it? Y N N/A
2. Have you inspected your harness prior to use? Current tag, any wear/damage to webbing/stitching, cleanliness etc. Y N N/A
3. Have you inspected all of your fall protection equipment prior to use? Eg. lanyards, connectors, anchor points, safety latches, shock absorbers, retractable lanyards, 360deg swivels. Y N N/A
4. Is your selected fall protection equipment adequate for the task? Check: rating, load restraints, current tag, any damage, cleanliness etc. Y N N/A
5. Have all team members reviewed and understood the rescue plan? Y N N/A
6. Are you trained and competent to be performing work at height? Y N N/A

Fixed Work Platform Y N N/A

7. Have you inspected the fixed work platform before use? Check for missing / loose floor grating panels, secured handrails, toe boards, etc. Y N N/A
8. Is the fixed work platform suitable for the job/task? Y N N/A

Ladders and Mobile Platforms (non motorized) Y N N/A

9. Have you selected the appropriate ladder or mobile platform (non motorized) for the task? Y N N/A
10. Have you conducted a pre-use safety check? If any issues were raised, did you address them? Y N N/A

Mobile Work Platform Y N N/A

11. Are you using the correct mobile work platform for the job/task? Y N N/A
12. Are you correctly secured in the basket with proper fall protection? Y N N/A
13. Have you completed a pre-operational inspection? If any issues were raised, were they addressed? Y N N/A
14. Have you confirmed that weather conditions will allow for safe use? Y N N/A
15. Have the ground conditions for mobile platform travel areas been inspected? e.g buried hazards, underground services, uneven terrain Y N N/A
16. Is there a documented rescue plan adequate for the task? Y N N/A
17. Are you using either an entrapment protection device (secondary guarding or pressure sensing device) OR you have a competent operator on the ground to provide emergency action? Y N N/A

Open Edge Protection Y N N/A

18. Is installed edge protection adequate to prevent falls? Note: Includes railings, horizontal life lines, rat lines etc. For pit environments: windrows and berms are in place? Y N N/A
19. Have you inspected the edge protection devices to ensure they are maintained and in good working order? (e.g. railings, hand rails, horizontal life lines, rat lines. For pit environments: windrows and berms are in place) Y N N/A

Scaffold Y N N/A

20. Does the scaffold have the load capacity posted? Eg. on the scaffold tag/compliance tag Y N N/A

Comments: If a critical control can not be verified, please indicate the nature of the failure including the question(s) that you answered no.



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Operator / Maintainer Critical Control Checklist (CCC)

Printed: Nov 29 2017

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Scaffold Y N N/A

- 21.** Have you visually inspected the scaffold and does it have a compliant tag (compliance tag / scaffold tag)? E.g. checked and signed within 30 days
-
- 22.** Is the scaffold protected from being hit by moving vehicles/equipment? E.g. clear area, barricading, signage etc
-
- 23.** Does the scaffolding have complete floors, toe boards, mid rails and handrails? E.g. no gaps between boards, all tied in
-
- 24.** Has the scaffold been erected on suitable foundations? Eg level, firm, not adjacent to trenches, excavations or underground services.
-

Comments: If a critical control can not be verified, please indicate the nature of the failure including the question(s) that you answered no.



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