



FACILITIES SERVICES STANDARD PRACTICE

TITLE:


**FACILITIES SERVICES
ELECTRICAL SAFETY JOB
PLANNING CHECKLIST**

INSTRUCTION NUMBER:

33-4016.3

ELECTRICAL SAFETY JOB PLANNING CHECKLIST

Identify	
<input type="checkbox"/> The hazards (complete the hazard analysis worksheet)	<input type="checkbox"/> How many people are needed to safely do the job?
<input type="checkbox"/> The voltage levels involved (Nominal and RMS)	<input type="checkbox"/> The shock protection boundaries
<input type="checkbox"/> Skills required	<input type="checkbox"/> The available incident energy
<input type="checkbox"/> Any "Loop" (secondary source) voltage source	<input type="checkbox"/> Potential for arc flash
<input type="checkbox"/> Any unusual work conditions	<input type="checkbox"/> The flash protection boundaries
Ask	
<input type="checkbox"/> Can the equipment be de-energized?	<input type="checkbox"/> Is a standby person required?
<input type="checkbox"/> Can the circuits to be worked on be back fed?	<input type="checkbox"/> Will this involve a "complex" LOTO procedure?
<input type="checkbox"/> Do the circuits to be worked have maintenance switches?	<input type="checkbox"/> Can remote operating devices be used?
Check	
<input type="checkbox"/> Job plans	<input type="checkbox"/> Safety procedures
<input type="checkbox"/> Single-line diagrams and as-built drawings	<input type="checkbox"/> Vendor information
<input type="checkbox"/> Equipment condition (Normal or Abnormal)	<input type="checkbox"/> Are individuals are familiar with the facility & equip.
<input type="checkbox"/> Facility and vendor resource information is up to date	<input type="checkbox"/> Arc Flash Hazard Analysis Studies
Know	
<input type="checkbox"/> What the job involves	<input type="checkbox"/> Who is in charge (Responsible Individual)?
<input type="checkbox"/> Who else needs to know? – Communicate!	<input type="checkbox"/> What activities will be conducted by contractors?
<input type="checkbox"/> Is a confined space permit required?	<input type="checkbox"/> Is an Energized Work Permit required?
<input type="checkbox"/> Can Maintenance Switches be engaged to reduce Arc Flash hazard?	
Think	
<input type="checkbox"/> About the unexpected events...what if?	<input type="checkbox"/> Installing barriers and barricades
<input type="checkbox"/> Will insulated tools be needed	<input type="checkbox"/> Will insulated blankets be used
<input type="checkbox"/> Installing and removing grounds	<input type="checkbox"/> Is temporary lighting needed
<input type="checkbox"/> What length, size, and type grounds will be used	<input type="checkbox"/> Will the forecasted weather have any impact
<input type="checkbox"/> Is a voltage source available to verify meter function	<input type="checkbox"/> Training needed
<input type="checkbox"/> Will any motorized equipment need to enter the limited approach boundary	<input type="checkbox"/> Will any portable tools be needed, battery power or plug-in? Is a portable GFCI needed
<input type="checkbox"/> Will any aerial lifts be needed	<input type="checkbox"/> Are heat or cold injuries a concern and require monitoring

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Prepare for an emergency	
<input type="checkbox"/> Is the standby person CPR/First Aid Certified?	<input type="checkbox"/> What is the address of the exact work location?
<input type="checkbox"/> Will a first responder bag and rescue hook be needed	<input type="checkbox"/> How is the equipment shut off in an emergency?
<input type="checkbox"/> Where is the nearest telephone or do I have cell reception?	<input type="checkbox"/> Where is the fire extinguisher?
<input type="checkbox"/> What radio channel will be monitored?	<input type="checkbox"/> Where is the fire alarm?
<input type="checkbox"/> Is confined space rescue equipment available?	<input type="checkbox"/> Are there multiple exits?
<input type="checkbox"/> Does EH&S or GFR need to be made aware of work?	
Hazard Assessments	
<input type="checkbox"/> Limited Approach Boundary:	<input type="checkbox"/> PPE HRC:
<input type="checkbox"/> Restricted Approach Boundary:	<input type="checkbox"/> Insulated Glove Class:
<input type="checkbox"/> Incident Energy (Cal/cm2):	<input type="checkbox"/> Method of Barricade:
<input type="checkbox"/> Arc Flash Boundary:	<input type="checkbox"/> PPE:
<input type="checkbox"/> RMS Voltage:	

Planning Completed By:

Name(s): _____ **Date:** _____

Project Name: _____

Project Location (Address, Bldg Name, Floor, Room, etc.):

At the conclusion of the work, COPIES of all completed documents are to be submitted to your department supervisor:

- | | |
|--|--|
| <input type="checkbox"/> Job Planning Form | <input type="checkbox"/> LO/TO Procedure |
| <input type="checkbox"/> Job Briefing Form | <input type="checkbox"/> LO/TO Device Removal Form |
| <input type="checkbox"/> Energized Work Permit | <input type="checkbox"/> Confined Space Permit |
| <input type="checkbox"/> Hazard Analysis Worksheet | |

Remember Job Planning and a Job Briefing are two different but critically important steps in ensuring the safety of everyone!

PREPARED BY: GLA APPROVED BY: WEB	DATE OF ISSUE: 10/25/21 SUPERSEDES: 04/19/21	PAGE: 2 of 2
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