



Date: _____ Day _____ Night _____
 @: _____
 PO#: _____

HAZ SPACE SAFETY MEETING - 201

1. Rescue Team

Haz Space Identifier	IPS Safety (Meeting Leader)	Time Held
IPS Medic	IPS IC / Supervisor	Time Approved

2. Safety Attendants

Hole Watch	Fire Watch	Bottle Watch
Signature	Signature	Signature

Communication Plan: P.A.C.E (update form 105)

Radio Channel	Radio Channel	Radio Channel
Contact Number	Contact Number	Contact Number

3. Human Performance Assessment Questions

SITE ORIENTATION

Wash - Are you oriented to emergency eye wash and shower stations?
Evacuation - Considering wind direction, which route will you take to the muster point?

PERMITTING

Access - Is everyone involved qualified to perform the work competently and safely?
Loto - Has individual and group policy been followed?
PPE - Do you have everything you need to ensure the job is completed efficiently and incident free?
JSA/JHA - Has each craft conducted a hazard assessment for the job scope?

EMERGENCY OPERATIONS

Communication Plan - Does everyone know how to contact rescue for non emergency and emergency situations?
Medical Plan - Does anyone have preexisting medical conditions that they should communicate to safety or rescue?
Risk Management Plan - Is everyone aware of the hazards identified by safety/rescue and their prescribed hazard controls?
Rescue Plan - Do the safety attendants, entrants, and supervisors understand their role and expectations in the event of rescue?

CONCLUSION OF DUTIES

Demobilization - Inform rescue why the hazard space work is concluding; End of Shift / Weather / Safety / Other; (time stamp)
Debriefing - In the event of a rescue, all affected personnel are requested to participate following for a brief post incident discussion

4. Hazardous Space Safety Meeting Attendees

Name	Company	Craft	Time	AM / PM
Name	Company	Craft	Time	AM / PM
Name	Company	Craft	Time	AM / PM

