

Approved
ORNL WORK PLAN
Operations, Maintenance and Services



Work Plan Name / Rev: CONF CHANGE GUIDE / 0
Expiration Date: 5/23/2027

WORK SCOPE/DESCRIPTION

Requester (Name/Badge/Division):	Sexton, Randall / 00712268 / X186														
Location of work (Bldg/Rm/Other):	8705 / /														
Work Plan Title:	Configuration Change Focusing guide to non-focusing														
Description of Service/Work Needed:	Configuration Change - changing from focusing guide to the non-focusing guide, sample environment will need to pull out the cryostat first														
Charge Number, if required:	N78205X2														
Work Plan Grade/Worktype:	3 / 0														
Author (Name/Badge):	Sexton, Randall / 00712268														
File Attachments:	<table border="1" style="width: 100%; border-collapse: collapse;"><thead><tr><th style="width: 15%;">Badge</th><th style="width: 20%;">Name</th><th style="width: 30%;">Attachment Desc</th><th style="width: 35%;">File Name</th></tr></thead><tbody><tr><td>00712268</td><td>Sexton, Randall</td><td>Shielding</td><td>BL5 LP guide shielding.pdf</td></tr><tr><td>00712268</td><td>Sexton, Randall</td><td>Guide</td><td>BL5 LP guide.pdf</td></tr></tbody></table>			Badge	Name	Attachment Desc	File Name	00712268	Sexton, Randall	Shielding	BL5 LP guide shielding.pdf	00712268	Sexton, Randall	Guide	BL5 LP guide.pdf
Badge	Name	Attachment Desc	File Name												
00712268	Sexton, Randall	Shielding	BL5 LP guide shielding.pdf												
00712268	Sexton, Randall	Guide	BL5 LP guide.pdf												

INSTRUCTIONS

Prerequisites/Precautions: SE remove Cryostat
Directions: Change focusing guide to non focusing guide. SE reinstall cryostat.
Post Work Testing:
Closeout:

JOB HAZARD EVALUATION

HAZARDS	PERMITS / CONTROLS
Hoisting and Rigging	<ul style="list-style-type: none">┆ Hard hats┆ Safety shoes┆ Qualified personnel┆ Traffic control
Manual Material Handling	<ul style="list-style-type: none">┆ Establish Controls (Guideline) [apply 30-50-30 criteria for a non-repetitive lifting task]<ul style="list-style-type: none">┆ Reduce weight┆ Decrease load┆ Design work area┆ Facilitate access to material┆ Optimum environment┆ Reduce distance /Provide proper storage facilities┆ Load storage┆ Eliminate manual lifting/lowering┆ Eliminate pushing/pulling – Use lifting aids┆ Other instructions to staff┆ Diversity of activities┆ Exposure Assessment: Enter or attach justification to classify exposure scenario as low risk, qualitative exposure assessment (QEA), or requirement to conduct quantitative exposure monitoring (QEM)

DOCUMENTATION REVIEW AUTHORIZATION
(Approvals are certification of hazards assessment)

Reviewer/Approver Roles	Signature	Date
Accountable Management		

(Service Provider, Line, Equipment Owner, or Facility Management)	Cross Jr, Bobby Lee	5/23/2022	
Task Leader	Sexton, Randall	5/23/2022	
Work Package Concurrence			
Facility Manager			
Operations Supervisor			
Facility Manager Approval To Start Work			
Facility Manager			
Work Start Authorization			
Task Leader			
Work Acknowledged Complete			
Task Leader			
Worker Feedback:			
WORK DETAILS - Directions			
Hazards	Permits/Controls	Resources	Dur
1) - 1. Beamline Staff Turn off Collimator 2. SE remove Cryostat 3. Remove Shielding for the guide 4. Remove focusing guide 5. Install non focusing guide 6. Install shielding 7. SE install Cryostat			
Hoisting and Rigging	<ul style="list-style-type: none"> Lift Plans: Use Lift Classification exhibit Hard hats Safety shoes Qualified personnel Traffic control 	<ul style="list-style-type: none"> SNS Instrument Support Technician 	1
Manual Material Handling	<ul style="list-style-type: none"> Establish Controls (Guideline) [apply 30-50-30 criteria for a non-repetitive lifting task] <ul style="list-style-type: none"> Reduce weight Decrease load Design work area Facilitate access to material Optimum environment Reduce distance /Provide proper storage facilities Load storage Eliminate manual lifting/lowering Eliminate pushing/pulling – Use lifting aids Other instructions to staff Exposure Assessment: Enter or attach justification to classify exposure scenario as low risk, qualitative exposure assessment (QEA), or requirement to conduct quantitative exposure monitoring (QEM) 		



Approved
ORNL WORK PLAN
Operations, Maintenance and Services



57982

Work Plan Name / Rev: CONF CHANGE GUIDE / 0
Expiration Date: 5/23/2027

PRE-JOB SAFETY REVIEW GUIDE

ID: 57982

Scope of Work: Review work package/plan to ensure all participants understand the work activity.

Hazards: Review the hazards identified in Job Hazard Evaluation (JHE) / work plan (IOP).

- € Since the work package / plan was written: 1) Have conditions changed? 2) Are there new hazards? Refer to Field Notes and Focus Areas.

Hazard Controls / Permits: Review:

- € Written permits for the work activity.
- € Precautions, step warnings, Hold Points ...
- € Personal Protective Equipment (PPE)

- € Work instructions for information - e.g., steps where hazards are introduced.
- € ORNL subject area requirements - e.g., non-permit hazard controls.

Performing Work:

- € Discuss group/individual responsibilities for safe & effective work.
- € Follow work instructions & safety procedures.
- € Availability/location of materials, tools, etc.
- € Any previous experiences / lessons learned?
- € Response if work cannot be performed as planned.
- € What is the worst thing that could happen?
- € Are there *Potential error traps* with the job? → →
- € Take a minute before: work start & leaving work area.
- € Work Hand-off / Turnover - workers & Task Leader

→ **Potential Error Traps:**

- € Time pressures
- € Distractive environment
- € High workload
- € First time evolution
- € First day back
- € Vague guidance
- € Over confidence
- € Imprecise communications
- € Work stress

Abnormal Situation Response:

- ┆ Stop Work: Observe an unsafe act, activity or condition that creates an imminent danger.
- ┆ Emergency Response: Discuss egress paths or other responses if problems are encountered.

Field Notes and Focus Areas: (Use this area as a work space to record notes related to new hazards identified in the field or changed conditions. Record feedback in work package/plan information systems.)

By signing below, I am indicating that I have been briefed on the potential hazards associated with completing this job.

Signature / Badge	Date	Signature / Badge	Date

ORNL Ordinary Lift Plan

Section 1	
Work Package, Work Order, or RSS Number:	Plan Prepared by: Silbino Vasquez
	Badge Number 603217

Section 2	
Lift Description Lift BL5 guide shielding	
Lift Information Center of Gravity determined by: <input type="checkbox"/> Manufacturer <input checked="" type="checkbox"/> Trial and Error <input type="checkbox"/> Calculations <input type="checkbox"/> Other (Describe) Weight of item: 745 lbs. No. of Legs n/a Size: n/a Length: n/a Hitch Type: <input checked="" type="checkbox"/> Vertical <input type="checkbox"/> Choker <input type="checkbox"/> Basket Sling Type/Bridle Information: <input checked="" type="checkbox"/> Nylon <input type="checkbox"/> Wire <input type="checkbox"/> Metal <input type="checkbox"/> Other: Sling angle: 90 deg. Load angle factor/multiplier: 1 D/d ratio reduction in efficiency for wire rope slings: n/a % Sling Tension/Loading: 745 lbs. Limited capacity of rigging as configured: 3200 lbs.	

Section 3	
Hoisting Equipment/Below the Hook/Lifting Equipment	Capacity
Deshazo crane IE-U1403	3 Ton

Section 4		
Rigging Equipment	Capacity	Rigging Hardware
3 ft nylon sling	3200 lbs	3/4" Swivel hoist ring
		1/2" shackle
		Capacity
		5000 lbs
		2 ton

Section 5	
Special requirements (facility requirements, communication methods, etc.):	

Pre-Lift Checklist (To be performed prior to lift):			
<ul style="list-style-type: none"> Pre-Job Brief Designated Signal Person Annual Inspections current on H&R equipment 	<ul style="list-style-type: none"> Equipment Inspected prior to lift Center of gravity identified capacities reduced 	<ul style="list-style-type: none"> Edge protectors used as needed Attachment points identified Load path and landing area clear 	<ul style="list-style-type: none"> Evacuation paths identified Load drop zone controlled Load will lift freely

ORNL Ordinary Lift Plan

Section 1		
Work Package, Work Order, or RSS Number:	Plan Prepared by: Silbino Vasquez	Badge Number 603217


Section 2	
Lift Description Lift BL5 guides	
Lift Information Center of Gravity determined by: <input type="checkbox"/> Manufacturer <input checked="" type="checkbox"/> Trial and Error <input type="checkbox"/> Calculations <input type="checkbox"/> Other (Describe) Weight of item: 75 lbs. No. of Legs n/a Size: n/a Length: n/a Hitch Type: <input checked="" type="checkbox"/> Vertical <input type="checkbox"/> Choker <input type="checkbox"/> Basket Sling Type/Bridle Information: <input checked="" type="checkbox"/> Nylon <input type="checkbox"/> Wire <input type="checkbox"/> Metal <input type="checkbox"/> Other: Sling angle: 90 deg. Load angle factor/multiplier: 1 D/d ratio reduction in efficiency for wire rope slings: n/a % Sling Tension/Loading: 75 lbs. Limited capacity of rigging as configured: 2500 lbs.	



Section 3	
Hoisting Equipment/Below the Hook/Lifting Equipment	Capacity
Deshazo crane IE-U1403	3 Ton

Section 4		
Rigging Equipment	Capacity	Rigging Hardware
3 ft nylon sling	3200 lbs	1/2" Swivel hoist ring
		1/2" shackle
		2500 lbs
		2 ton

Section 5			
Special requirements (facility requirements, communication methods, etc.):			
Pre-Lift Checklist (To be performed prior to lift):			
<ul style="list-style-type: none"> Pre-Job Brief Designated Signal Person Annual Inspections current on H&R equipment 	<ul style="list-style-type: none"> Equipment Inspected prior to lift Center of gravity identified capacities reduced 	<ul style="list-style-type: none"> Edge protectors used as needed Attachment points identified Load path and landing area clear 	<ul style="list-style-type: none"> Evacuation paths identified Load drop zone controlled Load will lift freely

ORNL Ordinary Lift Plan

Section 6				
Approvals – Valid for up to two (2) years				
Hoisting and Rigging Designated Leader or Hoisting and Rigging Competent Person	Print Name	Signature	Badge #	Date
	Silbino Vasquez		603217	3-29-21

Section 7		
Pre-Lift Briefing		
The following hoisting and lifting personnel have attended the pre-lift meeting, reviewed the approved lift plan, and understand the procedure and equipment to be used (sign on back as necessary)		
Name/Signature	Badge #	Date
	3053994	5-5-2021
	712268	12-9-2021
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Section 8: Additional Information (I.e. Applicable Load Travel Path/ Load Schematic and Rigging Method)
(May also be attached to back of plan)

