Name:				
Employee No:				
Declaration & Signature:				
I confirm the statements made within this assessment are my own work.				
Particinant's Signature	Date			

Scenario:

IT65E Assess Corridor Safety

You have been asked to remove some left over rail after a weekend possession at Meadowbank, next to down main, approximately 17.800km. You will be using heavy machinery to pick up short pieces of rail and load it onto a truck. The rails are located approximately 6m from the live track as per photo.

NOTE:

For this assessment please assume the following:

- Work & equipment will be outside the danger zone
- You can implement controls to ensure work & equipment will not encroach the Danger Zone

Photo on next page

Scenario Assessment



Send completed forms to:

assessment@transport.nsw.gov.au



Pre-work Briefing – Worksite protection/work method

Work location:		Briefing date: dd/mm/yy			
Scope of work:		Site Supervisor:	Phone:		
Work on track method (LPA, TOA, TWA, ASB, Lookout Working) Refer to Worksite Protection Plan for details:		Protection Officer:	Phone:		
Emergency assembly point:		Briefer:	Briefer's signature:		
First aid kit location:	First Aider:		SWMS/SWI Ref #:		
Hazards (eg. Site specific hazards identified, including physical environment, human errors, plant and equipment)	Controls (to be practicable level)	implemented to eliminate or reduce the risk to the lowest	Person responsible for Control		

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Pre-work Briefing – Worksite protection/work method *cont.*

All incidents and injuries must be reported to the Site Supervisor (Line Manager) and the Safety Incident and Injury Hotline on 1800 772 779							
All persons listed below acknow (Briefer to delete and initial any items that of		NOTE:	Persons are to qu	estion the Briefer if they don't unde	erstand any part of this briefing.		
have been inducted to the site hold the applicable and current certificates of competency, trade licence and/or induction record eg. Construction Industry Induction wear the appropriate Personal Protective Equipment (PPE) have been briefed on the contents of the Worksite Protection Plan for work within the Rail Corridor have been informed of the requirements of the electrical permit (if required)			have been briefed on the SWMS/SWIs/documented safe work practice for the job have been instructed in the controls recorded in this document and SWMS/SWIs are free from the effects of alcohol/drugs/fatigue have been made aware of any hazardous materials / substances on site have been briefed on Material Safety Data Sheets (MSDS) have been briefed on the site specific safety management plan have been briefed on the hazards of adjoining worksites/processes				
Name	Signature	Time of briefing: hh:mm	Amendment briefing: hh:mm & Initial	Name	Signature	Time of briefing: hh:mm	Amendment briefing: hh:mm & Initial

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Worksite Protection Plan

Worksite Location:				between	km	and km	
Adjacent Line/s:				between	km	and km	
Date of work: DD/MM/20YY Start time	e: HH:MM hours Finish time: HH:MM hours	Weather:		LPA -	TOA TWA	ASB	
					out if not applica	ıble)	
Site Supervisor or Team Manager: Work Order/Reference No.:				Work outside and not affecting the Danger Zone Work within a shunting		within a shunting yard	
				(cross	out if not applica	ıble)	
Work description (Scope):							
Minimum Warning Time Calculation	on when using Lookouts:						
sec + sec +	10 sec = Minimum Warning Time (MWT)	sec	km/h		metres	* Note – Add additiona 5 seconds of See Time if an additional Lookout is being used	
See Time (S) Move Time (M)	Safe Time $(S+M+10 \text{ sec} = MWT)$		Track Speed	Minimum Sighting Distance as	calculated		
sec + sec +	10 sec = Minimum Warning Time (MWT)	sec	km/h		metres		
Notes:							
	protection arrangements, including Handsignalle	rs Lookouts nlatt	forms bridges tunnels safe nla	ce Railway Track Signals sig	nnal number	s kilometre nost etc	
	benååÁn [¦^Ánaect¦æ (•ÁnaeAno⊚Án)åÁn,Áno⊚Ána[&*{ ^}		omis, briages, taimers, sare pra	ec, nanway mack signais, sig	gnar namber.	, knometre post, etc.	
Network Control Officer Details:	Name		Location		Contact Phon	ıa Numhar	
Į							
Protection Officer Details: Name Signature Cont		Contact Phon	act Phone Number				
Rail Safety Worker Card No. PO Level: or Other							



Protection Officer's Diary

Date	Time	Notes

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