

# JOB BRIEFING AND PLANNING CHECKLIST

## IDENTIFY

- |  |  |
|--|--|
| <input type="checkbox"/> The hazards                                     | <input type="checkbox"/> The shock protection boundaries                         |
| <input type="checkbox"/> The voltage levels involved                     | <input type="checkbox"/> The available incident energy                           |
| <input type="checkbox"/> Skills Required                                 | <input type="checkbox"/> Potential for arc flash (Conduct Flash Hazard Analysis) |
| <input type="checkbox"/> Any "foreign" (secondary source) voltage source | <input type="checkbox"/> Flash Protection Boundary                               |
| <input type="checkbox"/> Any unusual work conditions                     | <input type="checkbox"/> Number of people needed to do the job.                  |

## ASK

- |  |  |
|--|--|
| <input type="checkbox"/> Can the equipment be de-energized?                      | <input type="checkbox"/> Is a "standby person" required? |
| <input type="checkbox"/> Are backfeeds of the circuits to be worked on possible? |  |

## CHECK

- |  |   |
|--|---|
| <input type="checkbox"/> Job Plans   | <input type="checkbox"/> Safety procedures                          |
| <input type="checkbox"/> Single line diagrams and vendor prints                  | <input type="checkbox"/> Vendor information                         |
| <input type="checkbox"/> Status board  | <input type="checkbox"/> Individuals are familiar with the facility |
| <input type="checkbox"/> Information on plant and vendor resources is up to date |   |

## KNOW

- |  |   |
|--|---|
| <input type="checkbox"/> What the job is                       | <input type="checkbox"/> Who is in Charge |
| <input type="checkbox"/> Who else needs to know - Communicate! |   |

## THINK

- |   |  |
|---|--|
| <input type="checkbox"/> About the unexpected event . . .what if??        | <input type="checkbox"/> Install and remove grounds      |
| <input type="checkbox"/> Lock - Tag - Test - Try                          | <input type="checkbox"/> Install barriers and barricades |
| <input type="checkbox"/> Test for voltage FIRST                           | <input type="checkbox"/> What else . . .???              |
| <input type="checkbox"/> Use the right tools and equipment, including PPE |  |

## PREPARE FOR AN EMERGENCY

- |  |   |
|--|---|
| <input type="checkbox"/> Is the standby person CPR trained?                    | <input type="checkbox"/> What is the exact work location?               |
| <input type="checkbox"/> Is the required emergency equipment available? Where? | <input type="checkbox"/> How is the equipment shut off in an emergency? |
| <input type="checkbox"/> Where is the nearest telephone?                       | <input type="checkbox"/> Are the emergency telephone numbers known?     |
| <input type="checkbox"/> Where is the fire alarm?                              | <input type="checkbox"/> Where is the fire extinguisher?                |
| <input type="checkbox"/> Is confined space rescue available?                   | <input type="checkbox"/> Are radio communications available?            |

\_\_\_\_\_  
Electrically Qualified person(s)

\_\_\_\_\_  
Date

\_\_\_\_\_  
Electrically Qualified person(s)

\_\_\_\_\_  
Date

\_\_\_\_\_  
Supervisor of project

\_\_\_\_\_  
Date