





JOB/TASK: SITE VISITOR	DATE: 22/04/2013
THIS JSA COVERS: SALES REPS, MANAGERS, SUPERVISORS, SAFETY AUDITORS WHO ARE NOT PERFORMING PHYSICAL TASK ON SITE	Analysis by : John Payne, Brian Docker
EQUIPMENT/QUALIFICATIONS REQUIRED: Communication (Mobile Phone) First Aid Kit Drivers Licence Tape Measure Blue / White Card Building Plans (for some tasks)	PERSONAL PROTECTIVE EQUIPMENT TO BE AVAILABLE, CHECK SITE REQUIREMENT:    

RISK LEVEL **H = high** **M = med** **L = low** **N = negligible**

No	JOB/TASK STEP	POTENTIAL HAZARDS	INITIAL RISK LEVEL	SAFE WORK / CONTROL MEASURES	FINAL RISK LEVEL
1	Drive to site	Vehicle damage Breaking traffic code Breach of policy Working alone	M	Follow all road rules Valid licence required Drivers of BGC vehicle to have signed Motor Vehicle Policy BGC Employees must be on Internal Staff Who Visit Site Matrix Worker to have signed BGC Working Alone Policy	L
2	Access site	Being on wrong site Task confusion Mobile plant Trip hazards	M	Check plans, site signage Check with manager when visit is unplanned Do not create traffic hazard when parking Check for mobile plant activity, stay at least 2 metres away Take care walking around until familiar with site Seek builders supervisor if on site2	L

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3	Inspect site	Trips Mobile plant Electrical Falling objects Other people working on site Extreme weather Sun	M	Complete Site Safety Report – record any hazards in comments Liaise with other people on site, do not proceed or move to safe off-site location until hazard is removed Advise relevant people of task to be done Plan a route to shelter Comply with Sun Protection Policy	L
4	Conduct visit business (meeting, audit, ground level inspection)	As for step 3	M	As for step 3 Conduct audit interview away from other workers	L
5	Leave site	Mobile plant Trip hazards	M	Do not create traffic hazard when parking Check for mobile plant activity	L

Reviewed by:



 Gil Sander, Production Manager

DATE: 8-05-13

Approved by:



 Keith Walker, Division Manager

DATE: 8/5/13



 John Payne OH&S Manager

DATE: 7/5/13

I, _____ hereby confirm that I have read and been instructed on Job Safety Analysis Number SITE

04.00 and understand how the safe work / control measures are used in this task.

SIGNED _____ DATE: _____