

TITLE	Start Work Check – Mechanical Lifting		
Document Type	Department	Control No.	Revision
FRM	HSSE	HAS-GUI-011-FRM-008	1.0

WHEN TO COMPLETE – Before the start of any MECHANICAL LIFTING activities			
Confirm each control / safeguard below before starting works	Guidance for confirming each control/safeguard	Person(s) Performing Work	Start Work Verifier
I HAVE CONFIRMED:			
(1) The lift has been planned	- The lift method, equipment and number of people required has been assessed and determined - When required, an approved lift plan or procedure is in place and has been evaluated by a competent person - The lift has been assessed for: - Load weight - Load size - Center of gravity (e.g. lifting points) - The lifting equipment's current capacity and condition has been assessed - Equipment operator and lifting crew have discussed the written lift plan prior to lifting		
(2) The hazards are identified and controlled	- Complete a task risk assessment specific to the scope of work - Discuss hazards with the work team prior to the start of work - Identify overhead hazards and/or other obstructions (e.g. overhead power lines) making sure to check: - Load path - Swing radius - Overhead hazards - Pickup/lay-down zones - Check for simultaneous operations that may introduce any additional hazards - Discuss stop work considerations if work situation changes including change of weather Note: Consider how to apply 'hands-free lifting' (e.g. use of push poles and/or taglines)		
(3) Workers involved with the lift are qualified to perform their task	Lifting equipment operator and lifting crew are qualified to perform their task Note: To be 'qualified' may require certification and/or assessment to meet company or applicable legal requirements		

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(4) The lifting equipment is stable and potential or unplanned movement has been assessed	- Lifting appliance is level and/or placed on stable ground - Matting has been assessed for stability and is level for the lifting equipment - Outriggers are deployed - Loads have been assessed for stability, taking into account: - Load securing - Workplace conditions - Travel path - Equipment capacity - Equipment is operated per OEM requirements (e.g. weather, sea state and temperature)		
(5) The lifting and rigging equipment are: - Certified - Inspected - Rated for the lift	- Pre-use crane inspection has been completed - Safety and monitoring devices are in place and functioning - Manufacturer's load chart is available - The rigging equipment has been inspected prior to lift - The rigging equipment is rated for the lift Note: If load chart does not exist, assume equipment is not rated for the lift, stop work and identify alternative lifting equipment that is rated for the load.		
(6) A communication plan and responsibilities are agreed to by the lift crew	- Communication method(s) (e.g. hand signals, radio) have been agreed to and tested - Equipment operator and lifting crew have discussed the emergency response, including what emergency stop signals are to be used - The person in charge of the lift has been identified as per the lift plan or procedure - The members of the lift crew have agreed to their individual roles and responsibilities for the lift - The signaller for the lift has been identified (banksman/flagman/dogman/spotter)		
(7) The load has been inspected prior to lift	- Every load has been inspected for integrity and stability (e.g. center of gravity) - The load and its packaging can withstand the forces/motion caused by the lift - Loose objects have been secured or removed prior to lift		

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	Loose and small objects are well packaged or placed in lifting basket		
(8) Barriers and exclusion zones are in place	- Exclusion zones have been identified, and controls are in place to protect people from the line of fire hazards, including: - Working under suspended loads - Moving objects - Dropped objects - Access to exclusion zones is controlled (e.g. attendant or physical barriers) - Escape routes are unobstructed and known by the work crew		
Confirm these controls/safeguards are in place and verified prior to starting work. Stop and seek help if anything changes.			
	Printed Name & Role	Signature	Date
Person(s) Performing Work			
Start Work Verifier			

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