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| **Safety Task Card** |
| **POR 18** | **Operation of pedestrian tow tug**  |
| **Workplace Safety Hazards** |
| What are the hazards? | How might they be harmed? |
| Manual handlingFalling loadsStriking people stationary objects and structuresUneven or sloping routesWet floor surfaces | Cuts and bruisesImpact injuriesElectric shocksBack and muscle strainSlips trips and falls Possible fracture to bones |
| **Safe System of Work** |
| * Only trained operatives to operate tow tug machine to include correct attachment and operation of appliance and action to take in case of emergency.
* Visual checks of the tow tug to be completed prior to use and any fitted constraints or guards are operational and fitted correctly. Any damaged or defective equipment to be isolated and removed from service. Concerns highlighted to departmental team leader.
* Porters to check route avoiding changes in height – clearance is maximum 35mm lowest point.
* Tow tug must only be used to move two connected bins at one time with lids locked down.
* Operatives to ensure general work wear including gloves and slip resistant safety boots with toe protection caps
* On connecting the mover to the bins claws check fully engaged. This must be checked to ensure correct connection has taken place – risk of bin coming loose during transportation.
* Check bins are fully engaged to prevent slipping or disengaging on route
* Operators to make careful and steady progress avoiding obstructions and other pedestrians maintain speed avoiding drastic steering corrections and irregular speeds. Giving warning when necessary.
* Slow down on sloping or uneven ground.
* Implement manual handling safety precautions.
* Tow tug must always be left in safe condition with starter key turned to the left to completely turn the machine off- remove key and keep in safe place.
* Leave machine on charge – this must be done when machine not in use.

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| **Site Specific Actions**List any actions required in addition to the above safe system of work |
| **Bed Mover used in this site are:** |
| The above control measures are implemented within my unit. All relevant staff are aware of these control measures and this is recorded in the training record for this safety task card. |
| Unit Manager Name | Signed | Date |

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| **Safety Card Training Record** |
| **POR 18** | **Operation of pedestrian tow tug** |
| I confirm that I fully understand the risks and control measures associated with the taskand that I will follow the Safe System of Work at all times.  |
| Operative Name | Signature | Date |
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