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| **Safety Task Card** | | | | |
| **SO8** | **Search Duties** | | | |
| **Workplace Safety Hazards** | | | | |
| What are the hazards? | | | How might they be harmed? | |
| Assault  Road traffic accident | | | Physical assault  Verbal aggression | |
| **Safe System of Work** | | | | |
| * All Officers to be trained in Basic Job Training and Conflict Management and are familiar with how to diffuse situations of conflict safely. Minimum SIA licence to be held. * All Officers receive site induction Training and are familiar with site and hazards. * Check area is safe and suitable for officer to remain in area for long periods of time, this may include providing seating. * If vehicle check being completed. Engine to be turned off and passenger to step outside of vehicle. * Officer to wear PPE suitable for weather conditions and visibility wear * Officer to conduct search in a professional manner and should request assistance should a contractor be non-compliant when search is requested. * Officers to remain alert and vigilant when dealing with visitors and remain calm and polite at all times. * Officers have site radios and can communicate with colleagues and the control room for the duration of duties. * Area is covered by internal CCTV monitored remotely from the control room. * Site has ample first aiders who can respond if required. * Rotation of post to prevent isolation-based stress should not occur.   REFER: COM08 violence at work/ES13- Lone workers risk assessment/ Security SOP 04 Radio usage/ Security SOP 18 Search criteria | | | | |
| **Site Specific Actions**  List any actions required in addition to the above safe system of work | | | | |
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| 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** | | | | |
| **SO08** | **Search Duties** | | | |
| I confirm that I fully understand the risks and control measures associated with the task  and that I will follow the Safe System of Work at all times. | | | | |
| Operative Name | | Signature | Date | Trainer |
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