











HAZARD MANAGEMENT – SAFE OPERATING PROCEDURE (SOP)

Only to be completed where required as a control measure under a Risk Assessment

<p>A document setting out the requirements to carry out the work in a safe and healthy manner and in a logical sequence.</p> <p>It must be able to be easily read by those who need to know what has been planned.</p> <p>It is relevant to the following people:</p> <ul style="list-style-type: none"> the worker carrying out the work; and the person who has management and control over the work. 	<p>A SOP, if identified as a control measure, is to:</p> <ul style="list-style-type: none"> identify the work; specify/address the identified hazards relating to the work; describe the measures to be implemented to control the risks; take into account the circumstances at the workplace that may affect the way in which the work is carried out; take into account emergency management arrangements where applicable; and be communicated to all workers who carry out the work.
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NAME OF THE TASK/ACTIVITY		DATE:
LOCATION		Insert photo (Optional)
RISK ASSESSMENT (RA) NAME		
Residual risk rating on the RA	<input type="checkbox"/> Low <input type="checkbox"/> Medium <input type="checkbox"/> High <input type="checkbox"/> Very High	
Hazards identified on the RA		

**PERSONAL PROTECTIVE EQUIPMENT (BE SPECIFIC AND SPECIFY PPE TO BE WORN DURING THE TASK)
(DELETE THE ROW IF NOT APPLICABLE)**

	Eye protection: <input type="checkbox"/> Safety glasses <input type="checkbox"/> Eye shields <input type="checkbox"/> Safety goggles <input type="checkbox"/> Other:	
	Face protection: <input type="checkbox"/> Dust goggles <input type="checkbox"/> Face shield <input type="checkbox"/> Visor <input type="checkbox"/> Face mask <input type="checkbox"/> Dust mask <input type="checkbox"/> Other:	
	Respiratory protection: <input type="checkbox"/> Half face mask <input type="checkbox"/> Air-purifying respirator <input type="checkbox"/> Supplied air respirator <input type="checkbox"/> Other:	 <input type="checkbox"/> Full face mask
	<input type="checkbox"/> Long hair must be contained or covered <input type="checkbox"/> Other:	
	Head protection: <input type="checkbox"/> Hard hat <input type="checkbox"/> Other:	
	Hand protection: <input type="checkbox"/> Rubber <input type="checkbox"/> Cut resistant <input type="checkbox"/> Leather <input type="checkbox"/> Vinyl <input type="checkbox"/> Neoprene <input type="checkbox"/> Nitrile <input type="checkbox"/> Barrier creams <input type="checkbox"/> Other:	
	<input type="checkbox"/> Enclosed footwear: <input type="checkbox"/> Footwear that is resistant to spills of hazardous substances <input type="checkbox"/> Boots with steel caps <input type="checkbox"/> Other:	
	Protective clothing: <input type="checkbox"/> Lab coat <input type="checkbox"/> Gown <input type="checkbox"/> Long sleeves <input type="checkbox"/> Long pants <input type="checkbox"/> High visibility <input type="checkbox"/> Helmet <input type="checkbox"/> Sun protection <input type="checkbox"/> Other:	
	Hearing protection <input type="checkbox"/> Ear plugs <input type="checkbox"/> Ear muffs <input type="checkbox"/> Other:	

DESCRIBE, IN SEQUENCE, STEPS TO COMPLETE THE ACTIVITY SAFELY

Pre-operational checks
Operational checks/steps to complete the activity from start to finish (including transport and waste disposal where relevant)
On completion of work – steps to make safe (including clean up, any waste disposal & service/maintenance requirements)
Emergency and Spill Procedures, Transport or storage requirements (where relevant), First aid/Medical

Prepared by

People involved in the drafting of this SOP							
Person authorising the SOP	<table border="1" style="width: 100%;"> <tr> <td style="width: 30%;">Name:</td> <td style="width: 40%;"></td> <td style="width: 30%;">Signature</td> </tr> <tr> <td>Position:</td> <td></td> <td></td> </tr> </table>	Name:		Signature	Position:		
Name:		Signature					
Position:							

This SOP must be reviewed after any incident/injury associated with this activity or when a Risk assessment is reviewed.
 File your completed SOP as instructed by the Supervisor/Person in control of the area/activity and retain the SOP in accordance with the State Records of SA, General disposal [Schedule](#) No. 30 issued under the State Records Act 1997. (Contact the University's [Records Management Office](#) for further assistance/information if required.)

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Authorised by	Chief Operating Officer (University Operations)	Review Date:	1 December 2023	Page 1 of 1
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