

Location of closest Emergency Department:

Location of closest emergency services:

Approximate response time:

Can rescue be undertaken onsite by trained personnel? Yes No

Indicate rescue equipment that will be provided:

- | | | |
|---|---|---|
| <input checked="" type="checkbox"/> Fibre rope (meets relevant standards) | <input checked="" type="checkbox"/> Auto-stop Descender | <input type="checkbox"/> Round sling |
| <input checked="" type="checkbox"/> Karabiner | <input type="checkbox"/> Triple Lock Karabiner | <input checked="" type="checkbox"/> Pre-rigged control descent device |
| <input checked="" type="checkbox"/> Rescue Knife | <input type="checkbox"/> Rescue stretcher | <input type="checkbox"/> Recovery pole |
| <input type="checkbox"/> Other? (Specify) | <input type="checkbox"/> Other? (Specify) | <input type="checkbox"/> Other? (Specify) |

Provide details of rescue procedure:

Fall from EWP:

A rescue person to be located on ground level at all times who has been trained in the use of the emergency override switch on the EWP. The emergency override switch is to be tested prior to work commencing. If worker has fallen from Boom Lift and is suspended the rescue person is to lower the basket and worker to ground level. Once worker is at ground level, commence first aid and contact 000 if required.

Provide details of communication equipment that will be used: Verbal and Visual

Rescue personnel

Name: Dave Smith

Name:

First aiders

Name: Scott Williams

Name:

Documented rescue plan developed?	<u>Y</u> <u>N</u>	Documented rescue plan rehearsed?	<u>Y</u> <u>N</u>	Documented Rescue plan accessible on site?	<u>Y</u> <u>N</u>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>