



Confined Spaces

Critical Controls

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| 1. Has an assessment been undertaken to identify potential sources of hazardous energy or substances to the confined space? Are all identified sources isolated and locked out? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 2. Is atmospheric monitoring in place to prevent entry of people into and detect unsafe atmospheres (flammable, toxic gases, unsafe O ₂ levels)? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |

Other controls to consider.

Confined space entry permit

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| 1. Have you signed onto an approved confined space entry permit for the task? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 2. Have you confirmed the confined space location on the permit is the space to be worked on? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 3. Do you have an approved risk assessment in place for the confined space task? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |

Isolations and lockouts

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| 4. Have you checked that the equipment isolated covers the work area /scope of works? | <input type="checkbox"/> N/A | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 5. Have you all applied your personal danger locks to the isolation points? | <input type="checkbox"/> N/A | <input type="checkbox"/> Yes | <input type="checkbox"/> No |

Clean and purge

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| 6. Have you inspected the confined space to ensure any hang-ups that have potential to fall have been removed prior to entry? | <input type="checkbox"/> N/A | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 7. Have you purged the space to ensure the atmosphere is safe prior to entering? | <input type="checkbox"/> N/A | <input type="checkbox"/> Yes | <input type="checkbox"/> No |

Atmospheric testing and monitoring

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| 8. Are the gas test results within the safe range listed on the confined space entry permit? | <input type="checkbox"/> Yes | <input type="checkbox"/> No | |
| 9. Is atmospheric testing conducted in line with the confined space entry permit? | <input type="checkbox"/> Yes | <input type="checkbox"/> No | |
| 10. Is ventilation provided in line with the risk assessment? | <input type="checkbox"/> N/A | <input type="checkbox"/> Yes | <input type="checkbox"/> No |

Access control

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| 11. Is the standby person fulfilling their duties near the entrance to the space? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 12. <i>Note: Must have continuous contact with persons inside, monitor safety equipment, maintain the log, and be prepared to respond to an emergency.</i> | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 13. Have you installed effective barricading to control access to the space? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 14. Do you have effective means of accessing/exiting the space?
<i>Note: consider if the entrance is large enough for emergency extraction.</i> | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 15. Are the entrances/exits to the confined space clear of obstructions? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |

Rescue plan

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| 16. Do you have an approved confined space rescue plan available at the work front? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 17. Do you understand the rescue plan for the confined space works and able to execute it? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |