



# **Fall Protection Plan**

## **Site Specific Fall Protection Plan**

## Site-specific Fall Protection Plan

Planning plays a key role in protecting workers from fall hazards. This fall protection plan template can assist the planning process. Employers should ensure that fall protection plans are designed to address site-specific conditions and comply with Safety Acts and Occupational Health and Safety Regulations.

|                                 |
|---------------------------------|
| Company Project Name:.....      |
| Site Address:.....              |
| Start date/Duration:.....       |
| Work Description/Location:..... |
| Supervisor in Charge:.....      |
| Form Completed by:.....         |

Are records of approved Working at Heights training up-to-date and readily available?

Yes ..... No.....

### NOTES:

1. Form is to be completed by a supervisor or worker who has taken approved WAH training.
2. Keep form on site as a record of site-specific training.
3. All workers to inspect PPE.

### Step 1: Identify the site-specific fall hazards and controls.

| Hazard(s)   | Description  | Control  | Initial |
|---|--|--|---------|
| Collapse of ground                                | Collapse of ground in rear of main building                                      | <ul style="list-style-type: none"><li>• Indicate precautionary zone</li><li>• Safe working platform</li><li>• PPE - harnesses and</li><li>• &amp; lanyards</li></ul> | AB      |
| Working at height (Inc. Falling persons' Objects) | Excavations in progress in southern side of main bldg. Beware of falling Objects | Scaffold handover certificate requires Edge protection Fall arrest equipment   | AB      |

**Step 2: Identify changes in the workplace.**

If the Fall Protection Work Plan was developed beforehand, inspect the work location again and look for any new hazards related to the work currently being done.

Do any new hazards exist Yes..... No.....**X**..... Initial.....**AB**.....

If yes, list the controls for these new hazards and review it with workers.

| Hazard(s) | Description | Control | Initial |
|-----------|-------------|---------|---------|
|           |             |         |         |
|           |             |         |         |


**Step 3: Try to eliminate the fall hazard.**

|   | Yes | No |
|---|-----|----|
| <p>Can the work be relocated to a place where a fall hazard does not exist</p> <p>Can a guardrail system be used? If Yes, consider the following:</p> <p>Does the guardrail meet the strength requirements</p> <p>Is the guardrail no more than 30 cm from the edge being protected?</p> <p>Has it been installed according to the manufacturer's recommendations?</p> <p>If made of wood, can the guardrail resist all loads that it may be subjected to?</p> <p><b>Can floor or roof openings be covered? If Yes, consider the following:</b></p> <p>Does the cover meet the strength requirements</p> <p>Is the cover securely fastened?</p> <p>Is the cover adequately identified as a cover?</p> |     |    |
| <p><b>Can an elevated work platform (EWP) be used? If Yes, consider the following:</b></p> <p>Is the EWP located on a level surface?</p> <p>Is the surface able to support the EWP and its load?</p> <p>Has the worker on it received fall protection training and been trained on</p>  |     |    |

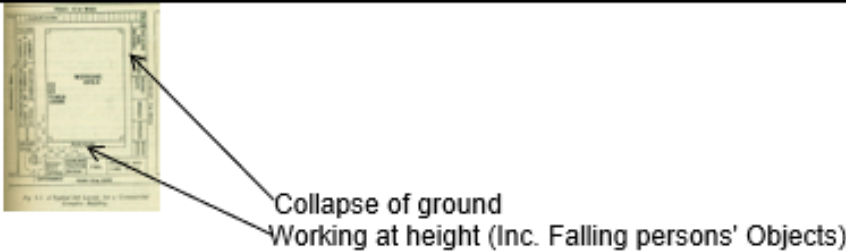
|  |  |  |
|--|--|--|
| <p>this specific EWP?</p> <p>Is there a worker on the ground who <u>is able to</u> lower the EWP in case of an emergency?</p>  |  |  |
| <p><b>Can a travel restraint system be used? If Yes, consider the following:</b></p> <p>Does the system meet the requirements</p> <p>Does the anchor point meet the requirements</p> <p>Is the equipment certified</p> <p>Is the travel restraint system set up to prevent the worker from reaching the fall</p> <p>Hazard? If not, a fall arrest system may be needed.</p> <p>Have other fall hazards in the area been considered? If not, a fall arrest system may be needed.</p> <p>Has the equipment and system been inspected before use, as per the manufacturer's instructions?</p> |  |  |
| <p><b>Can scaffolding or pump jacks be used</b></p>  |  |  |

|  |
|--|
| <p><b>Step 4: Take steps to control the fall hazard.</b></p> |
|--|

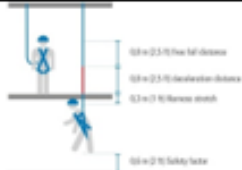
|   |  |  |
|---|--|--|
| <p><b>Can a fall arrest system be used? If Yes, consider the following:</b></p> <p>Is an emergency plan in place to rescue a suspended worker whose fall has been arrested?</p> <p>Has the worker been trained in fall protection and the specific fall arrest system being used</p> <p>Does the fall arrest system meet the requirements</p> <p>Does the anchor point meet the requirements</p> <p>Is the anchor point located so that the lifeline is close to a 90° angle from the edge</p> <p>Is the fall arrest system set up to prevent the worker from hitting an object below</p> <p>Have other fall hazards in the work area been considered</p> <p>Has the fall arrest equipment been certified</p> <p>Has the fall arrest equipment and system been inspected before use, as per the manufacturer's instructions and requirements</p> <p>If using a horizontal lifeline system, has it been designed by a professional engineer and installed according to the engineer's requirements</p> |  |  |
| <p><b>Can a safety net be used? If Yes, consider the following:</b></p> <p>Is an emergency plan in place to rescue a suspended worker whose fall has been arrested?</p> <p>Does the safety net meet the requirements</p> <p>Has the safety nets been installed according to the manufacturer's instructions</p>   |  |  |

|   |  |  |
|---|--|--|
| Has the safety nets been inspected according to the manufacturer's instructions   |  |  |
| <b>Is a ladder being used? If Yes, consider the following:</b><br>Has a risk assessment been done? (See Ladder Risk Assessment Checklist)<br>Are the requirements of Ladder Use in Construction Guideline being met |  |  |
| <b>Can any other steps to control the fall hazards be used? If Yes, describe them below:</b><br><br>                               |  |  |

**Step 5: Make a diagram of the location of each fall hazard and include any relevant details.**



**Step 6: Calculate the fall clearance distance.**



**Free fall distance = 0, 8 meter (2 meters lanyard – 1,2 meter distance between D-ring and anchor point)**

**Step 7: Describe the system setup or work procedures.**

See Example 2: SAFE WORK PROCEDURE 021 - WORKING AT HEIGHTS - MAY 2021  
 DOC.12345/12/2021]

**Step 8: Create a fall emergency plan to rescue a suspended worker whose fall has been arrested (one for each location if required).**

The Rescue Ladder is specially designed to facilitate the rescue of fallen workers at significant heights, and is thus particularly applicable for the wind energy industry. This durable ladder system is manufactured with unique ladder standoffs to make footholds easier and self-rescue more likely. The Rescue Ladder can be deployed within seconds to rescue the victim from fall.

|                                     |                      |                |                         |
|-------------------------------------|----------------------|----------------|-------------------------|
| <b>Rescue Equipment</b>             | <b>Rescue Ladder</b> |                |                         |
| <b>Equipment Inspection Date</b>    |                      |                |                         |
| <b>Roles of Rescuers</b>            |                      |                |                         |
| <b>Rescuers' Names</b>              |                      |                |                         |
| <b>Rescuers' Signatures</b>         |                      |                |                         |
| <b>Has the plan been practiced?</b> | <b>Yes.....</b>      | <b>No.....</b> | <b>Drill date:.....</b> |

**Step 9: Approvals**

|                     |  |                      |  |
|---------------------|--|----------------------|--|
| <b>Prepared by:</b> |  | <b>Date Prepared</b> |  |
| <b>Approved by:</b> |  | <b>Date Approved</b> |  |

**Step 10: Get worker sign-off.**

Workers need to acknowledge that they have read the requirements and understand their responsibilities under the Fall Protection Work Plan.

| <b>Print Name</b> | <b>Signature</b> |
|-------------------|------------------|
|                   |                  |
|                   |                  |
|                   |                  |
|                   |                  |