

Safe Work Practice (SWP)

Name of Task

Shop Vacuum

Department/Unit: Trades Programs, Custodial and Maintenance

Personal Protective Equipment or other required equipment and safety considerations: Eye protection, and CSA approved footwear. Long hair must be tied back or contained. No loose fitting clothing, or jewelry (watches, rings or necklaces).

Hazards: Dust/debris irritation, and noise.

Successful completion of safety unit and test.

Steps to be taken to complete task safely:

- 1 Pre-Operational Safety Checks:-
 - Inspect required personal protective equipment and replace if necessary.
 - Ensure no slip/trip hazards are present, make sure guard, if present, are installed and working properly, locate and ensure you are familiar with the operation of the ON/OFF starter.
- 2 Prohibited Activities:
 - Do not smoke.
 - Do not leave this equipment unattended.
 - Do not vacuum anything that is burning.
 - Do not vacuum toxic materials, fireplace soot or ash.
 - Do not lift a vacuum that is heavy with liquid or debris.
 - Do not use blower for any job except blowing dirt and debris.
 - Do not direct air at bystanders.
- 3 Wear appropriate personal protective equipment.
- 4 Make all adjustments with POWER OFF.
- 5 Select and securely attach appropriate accessory for the job.
- 6 Securely connect hose to either vacuum or blower port.
- 7 Turn ON and perform operation.
- 8 Turn OFF when completed and drain or empty drum.
- 9 Store hoses and accessories with POWER OFF.

If an emergency situation occurs while conducting this task, or there is an equipment malfunction, shut the equipment off immediately and follow the lock out procedure. Report any hazardous situation to your instructor/supervisor immediately.

Responsibilities, Completion and Review

Management and workers to ensure all duties performed in accordance to training, established health and safety regulations/guidelines, policies and procedures (e.g. utilizing personal, protective equipment as per SAFE Work Procedures). Notify Manager or designates (i.e. supervisors) of all occurrences, injuries illnesses or safety and health concerns which are likely to harm themselves, co-workers, or any others who enter the premises.

Completed by and Date:	Approved by:
Last Reviewed/Revised by and Date:	Note: This task will be monitored periodically to ensure compliance and effectiveness.