

## Safe Work Practice (SWP)

### Name of Task

# **Washing Walls and Ceilings**

**Personal Protective Equipment or other required equipment and safety considerations**: Eye protection, CSA approved footwear, rubber gloves, protective clothing and fall protection, if necessary.

Hazards: Slip and fall, splashing of eyes and face, and ladder falls.

#### **Required Training:**

### Steps to be taken to complete task safely:

- 1 Pre-Operational Safety Checks:-
  - Ensure ladders are not damaged.
  - Ensure rubber gloves are free of tears and fit properly.
  - Ensure that "wet floor" signs are placed around the immediate work area.
  - Inspects required personal protective equipment and replace if necessary.
- 2 **Prohibited Activities:** 
  - Do not work at task alone.
  - Do not leave equipment unattended.
  - Do not place ladder on an uneven surface.
  - Do not place ladders on objects or surfaces other than floors.
  - Do not over extend your reach while on the ladder.
  - Do not stand on top of the ladder.
  - Do not stand on object other than the ladder, i.e., counters, garbage cans etc.
- 3 Wear all required personal protective equipment.
- 4 Retrieve all the supplies that are required for the task.
- Work at an angle so as not to splash face/eyes with cleansers.
- 6 **Post-Operational Safety Checks:**-
  - Clean up work area by wiping up any water on the floor.
  - Dump and clean pails.
  - Rinse mops.
  - Discard rags.
  - Place all materials in their proper storage area.

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:	<b>Note:</b> This task will be monitored periodically to ensure compliance and effectiveness.