

# Safe Work Practice (SWP)

# Name of Task Wiping Surfaces

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**Personal Protective Equipment or other required equipment and safety considerations**: Eye protection, CSA approved footwear, and latex gloves.

Hazards: Muscle fatigue, wrist and hand strains, and cuts and lecerations.

**Required Training:** • Hands on training with instruction for proer safety procedures.

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

# 1 Pre-Operational Safety Checks:

- Become knowledgeable of the cleaning chemicals to be used by reading the Supplier Label or MSDS for each cleaning chemical to be used.
- Ensure cloth is large enough to be efficient, but small enough to wring out and avoid hand strain.
- Ensure that surfaces are free of sharp objects and damaged surfaces to avoid cutting hands and fingers.
- Ensure the spray nozzle is facing out ward to avoid spraying of face.
- Inspect required personal protective equipment and replace if required.

#### 2 **Prohibited Activities:**

- Do not over extend your reach.
- Do not stand on any objects other than ladders to reach.
- 3 Put on all personal protective equipment.
- 4 Divide task into sections and avoid repetitive bending and twisting of wrists.
- 5 Choose the proper equipment and cleaning product for the task.
- 6 Spay cleaning product on all surfaces to be cleaned.
- 7 Wipe cleaning product off of surface, keeping wrist straight and alternating hands.

#### 8 Post-Operational Safety Checks:-

- Discard all dirty rags and or paper towels.
- Ensure the floor and surrounding area is dry and clean.

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.		