NBCC Safe Work Practice (SWP)

Name of Task: Blow Gun			
Department/Unit: Trades			
Personal	Protectiv	e Equipment or other required equipment or other safety considerations:	
		face shields	
Effective chip protection (ie: use of screens or barriers)			
		ning to cover bare skin	
	Hazards		
	ssive air p		
Flying chip exposure			
Required		Successful completion of NBCC Safety Course (Work Safely or Workplace	
Training		Safety Practices)	
		Shop safety orientation	
		Read and understand SWP	
		For students, practical demonstration and Instructor supervision required	
Pre-Operational		Ensure air pressure is below 30 psi, if a safety tip is not used	
Safety Checks		• You must do your own risk assessment with regard to the correct PPE	
		to wear.	
Prohibited		Never participate in horseplay with compressed air	
Activities		Never use compressed air to clean clothing or any part of your body	
		Safe Work Procedure(s)	
1	Ensure tha	at excessive pressure and chip fly back hazards are effectively controlled.	
	Always wear the appropriate personal protective equipment. As stated previously, eye protection must be worn when using compressed air.		
		compressed air to clean clothing or the body. This greatly increases the risk of an	
		ectly contacting the body. Particles can also easily become dislodged and enter the	
		es. Use a safe alternative such as a brush or vacuum tool.	
		ticipate in horseplay with compressed air. Never point an air gun or direct air	
	toward another individual.		
	Never tamper with air guns or modify them in any way. Homemade devices added to air guns usually increase the potential for injury.		
	usually inc		
		ncy situation occurs while conducting this task, or there is an equipment , shut the equipment off immediately and follow the lock out procedure.	
REPORT ANY HAZARDOUS SITUATION TO YOUR INSTRUCTOR/SUPERVISOR IMMEDIATELY			
Houseke	eping		
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Version 1.0

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:
 1/26/2021

 Approved by:
 Kofy Laster

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

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