

Confined Space Rescue Plan



Reason for entry:

Work activity description:

Nature of work to be undertaken:

Confined space to be entered:

Description:

Location:

Potential hazards:

Entry Permit Supervisor Name:

Rescue Personnel:

Rescue team:

Name:	Employer:	Date:
Name:	Employer:	Date:
Name:	Employer:	Date:

Communication Controls:

Minimum requirements will include:	Yes	No	Provide details as required:
One stand-by person		
Two/more stand-by personnel		
Rescue team		
Communication via voice/direct sight		
Communication via two way radio		
Communication via hand signals		
Communication via rope signal		
Mobile phone available to ring emergency services		

Rescue / Retrieval Considerations:

Minimum provisions required:	Yes	No	Provide details – Specifically for Complex Scenarios:
Stand-by person to individually handle		
Safety harness/rescue kit in vicinity with competent user(s)		
Specific access platforms/scaffolding erected		
Specific fire fighting provisions		
First aid kit in vicinity		
Other:		

Personal Protective Equipment (PPE) Requirements & Other Precautions

Minimum PPE / other items required:	Yes	No	Provide details as required:
Supplied air breathing apparatus		
Air purifying respirator		
Particulate mask		
Safety harness and lanyard/lifeline		
Head protection/Foot protection		
Face shield/goggles/safety glasses		
Ear muffs/plugs		
Gloves		
Warning notices / barricades required		
Specific lighting provisions required		
Specific hot work permit required		
Other:		
Attachments (other documents/plans prepared)		

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Methods of Rescue						
Requirements can include:	Yes	No	Provide details as required:			
External (Retrieval)						
Internal:						
with SCBA						
without SCBA						
Anchorage:						
Tripod						
Beam						
Stairwell						
Support Strut/Column						
Overhead						
The atmosphere in the space is safe to enter:						
<input type="checkbox"/> Without respiratory protection <input type="checkbox"/> With an air purifying device <input type="checkbox"/> With a supplied-air device						
Rescue Equipment requirements						
Requirements can include:	Yes	No	Provide details as required:			
Harnesses						
Tripod						
Rescue System						
Main Lines						
Safety Lines						
Carabiners						
Shock absorbers/Lanyards						
Gas Detector						
Other:						
Rescue Equipment inspected by:						
Identified rescue equipment inspected by a competent person:						
Name:	Employer:		Date:			
Name:	Employer:		Date:			
First Aid personnel:						
First Aid personnel :						
Name:	Employer:		Date:			
Name:	Employer:		Date:			
Principal Contractor's Authorisation:						
This Authorisation signifies that the rescue plan component of the Confined Space entry has been completed and that confined space entry / work is authorised to commence in accordance with the Permit Request.						
Name:	Signature:	Date:	Time:			
Rescue Team Personnel						
I the undersigned hereby acknowledge that I understand my role, the procedures, control measures and precautions to be observed with the rescue plan for this confined space. I will comply with these requirements at all times and report any new/unforeseen hazard that presents a risk to the safety of all personnel involved with this task.						
Sign on				Sign Off		
Print Name (First & Last)	Date	Time	Signature	Date	Time	Signature

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Description of Space

Include location of Entry Permit Supervisor and Stand by person:

Diagram of Space

Show locations of all personnel involved in task:

ON SITE RESCUE

The On Site Rescue Plan is part of the Confined Space Entry Permit and is based on the assessment of hazards in the space.

Prior to entry and/or work in the Confined Space:

- The Entry Permit Supervisor will ensure that the on-site rescue plan for the confined space has been completed and that all the rescue equipment identified in the plan is available to effect a rescue in the confined space.
- The Entry Supervisor will ensure that an adequate number of appropriately trained personnel (as documented in the rescue plan) are available for immediate implementation of the rescue if so required.
- The Entry Supervisor will ensure that all personnel in the rescue team, understand and know their roles and responsibilities and have signed the rescue plan prior to any personnel entering the confined space. Ensure everyone is aware of the evacuation alarm.
- The Stand by person must establish communication with all workers (inside and outside of the confined space) using the means described in the rescue plan.

On entry and while working in the Confined Space:

- The Stand by person who is stationed outside and near the entrance to the confined space as shown in the rescue plan, remains in constant communication with all workers inside the confined space.
- The Stand by person must be notified immediately if an entrant recognises:
 - Unusual action or behaviour
 - An unexpected hazard
 - An unsafe act
 - Detects a condition prohibited by the permit
- Personnel must exit the confined space as quickly as possible, when:
 - An order to evacuate is given by the Entry Permit Supervisor or the Stand by person
 - An entrant recognises a sign or symptom of exposure
 - An unacceptable condition arises
 - An evacuation alarm is activated

In the event of a confined space rescue:

- The Entry Permit Supervisor or the Stand by person **do not** enter the confined space but immediately summons a rescue response from the on-site rescue team. A nominated person must inform emergency services immediately if required. If injured person is able to be extracted, assess the persons injuries and provide assistance and first aid as necessary.