

Method Statement

Prepared by	Revision	Document
Mark Deven	V1	MD/2018-08
Project name:	Date	
Location or site:	Site Contact	
Organisation to do work:	UK Calibrations Ltd	Installation Supervisor

Method Statement Title	CERTIFICATION OF HARDNESS TESTING MACHINES
------------------------	---

Personnel consulted during preparation of this method statement:		Project Manager	Date
MS & RA prepared by:	MARK DEVEN	Signed: <i>Mark Deven</i>	Date: 20/08/2018
MS & RA reviewed by:	COLIN THORPE	Signed: <i>CTH</i>	Date: 20/08/2018
		Signed:	Date:

Distribution list for Method Statement:	
---	--

Associated documents:	Risk assessment(s) ref.:	/MD V1
	COSHH assessment ref. if required:	
	Hand/arm vibration assessment:	
	Lifting plan (if required):	
	Other attachments (e.g. drawings):	

Proposed Start Date: **Week:**

Proposed End Date: **Week:**

Permits required: see below						
To Enter	Electrical (HV)	General work	To dig	Hot work	Client's permit	Other (specify)
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

A safe means of access to and from the work:

(with adequate routes for pedestrians and vehicles)

Access to the place of work as per sites rules. All personnel must adhere to active pedestrian walkways and must not encroach into areas that are cordoned off for other works unless specific authorisation has been granted.

Access to be provided for the Service/Calibration of said Hardness Testing Machines.

All affected Personnel are to be made aware of all site conditions via the pre-start inductions as arranged before work is commenced – Inductions to be carried out if required prior to start.

Prepared by	Revision	Document
Mark Deven	V1	MD/2018-08
Project name:	Date	
Location or site:	Site Contact	
Organisation to do work:	Installation Supervisor	

Method Statement Title	CERTIFICATION OF HARDNESS TESTING MACHINES
------------------------	---

Summary of Procedures:

- All Calibration Staff / Personnel to be made aware of all site conditions via a pre-arranged induction if required.
- All H & S Information to be provided prior to Commencement of Works.
- Off Site Parking Applies & Pedestrian access to the place of work as per sites rules. All personnel must adhere to active pedestrian walkways and must not encroach into areas that are cordoned off for other works unless specific authorisation has been granted. Access to be provided whilst Service/Calibrations are performed.
- Access to be provided whilst unloading of Tools, Equipment & Materials is carried out
- All documentation (e.g. Risk Assessments) to be Completed

Safe Work Areas:

- All/any operatives must stay within Safe Working Zones at all times

Mandatory PPE and additional PPE required:

Task Specific PPE	Task Specific Tooling
<ul style="list-style-type: none"> • Gloves (suitable for task if required) • Colour Specific High-visibility clothing • Safety Footwear. • Ear Defenders if required. • Eye Protection if required. <p>All PPE to be Inspected Prior to Use</p>	<ul style="list-style-type: none"> • Laptop • Load cells • Kal-Rock • General Hand Tools <p>All Power Tools to have Valid PAT Certification</p>

Prepared by	Revision	Document
Mark Deven	V1	MD/2018-08
Project name:	Date	
Location or site:	Site Contact	
Organisation to do work:	Installation Supervisor	

UK Calibrations Ltd

Method Statement Title

CERTIFICATION OF HARDNESS TESTING MACHINES**Accident Reporting & Near Miss Reporting**

All Accidents must be Reported Immediately to the Site Supervisor and thereafter entered into the Site Accident Log Book. In addition, any accidents must also be entered into the Companies Accident Log Book.

A near-miss is a hazardous situation, event or unsafe act which does not result in an injury but which could quite easily have done so. The only difference between an accident and a near-miss is the outcome or consequence.

The most obvious near-misses are so-called 'close shaves', where someone avoids injury in a clear or dramatic event. Less obvious are routine failures, but these can be equally damaging to health.

A common example of a routine failure is when a person consistently adopts a bad working posture.

Remember to report all near misses

Remember to report all accidents

Prepared by	Revision	Document
Mark Deven	V1	MD/2018-08
Project name:	Date	
Location or site:	Site Contact	
Organisation to do work:	Installation Supervisor	

Method Statement Title	CERTIFICATION OF HARDNESS TESTING MACHINES
------------------------	---

Pre-Start Works Summary

- Associated Storage Container if required.
- Hand Held Tools only
- Various Hand Tools: Screwdrivers, Allen keys, spanners.

Power Tools

- None used.

Summary of Installation Works if required

Items 1-2 - Please refer to specific RAMS Documentation for the Off Loading & Positioning of the Equipment Package

1. Receive & Assist in the Delivery of Equipment Packages if required.
2. Unpacking and positioning of equipment. (If required).
Packaging will be removed and equipment placed into position. Specific guidelines for safe movement of the machines are addressed in the appropriate Risk Assessments. Packaging will be disposed of according to local site requirements or removed from site.
3. Connection of equipment
To be carried out by manufactures installation staff.
4. Equipment testing
All equipment will be tested after connection for functionality, to ensure correct operation.

In Summary...

- Unload all materials and store safely as required and in accordance with site specific requirements.
- Prepare & check “before use” any power tools and ensure that valid PAT certification is in place
- Install and calibrate machine to required standard at scales specified by customer.
- Handover to client when complete.

Prepared by	Revision	Document
Mark Deven	V1	MD/2018-08
Project name:	Date	
Location or site:	Site Contact	
Organisation to do work:	Installation Supervisor	

UK Calibrations Ltd

Method Statement Title	CERTIFICATION OF HARDNESS TESTING MACHINES
------------------------	---

Read and once understood sign the method statement and risk assessment.

Before starting work. If applicable, attend the daily task briefing about what activities are going on around the site. Then sign to acknowledge that you understand your roll.

Possible Restrictions

- Any Site-Specific Restricted Access
- Deviation of Method Statement
- Any Changes in Risk Element
- Remember if you are unsure about any tasks that you are given then seek advice. **Always ASK.**

DO NOT - UNDER ANY CIRCUMSTANCES:

ENCROACH INTO ANY EXCLUSION ZONES WITHOUT AUTHORISATION

if in doubt as to who is in charge of such areas do not attempt to breach this rule until your representative is informed and provides authorisation

Method Statement

Prepared by	Revision	Document
Mark Deven	V1	MD/2018-08

Project name:		Date	
Location or site:		Site Contact	
Organisation to do work:	UK Calibrations Ltd	Installation Supervisor	

Method Statement Title	CERTIFICATION OF HARDNESS TESTING MACHINES
------------------------	---

From the tasks and methodology above list the significant hazards associated with each step and detail the consequences, then design suitable control measures to eliminate or reduce the risk to an acceptable level. This should be completed on the separate Risk Assessment Documents and attached to this Method Statement.

Any changes to the operation must be reviewed or changed with permission from the project manager

Revisions:

This Method Statement is to be referred to as /MD V1. From the date shown above V1 is to supersede any information or guidance offered as stated in that of any other correspondence relating to these works.

Safety check lists:	
Do	DO NOT
<ul style="list-style-type: none"> Wear appropriate PPE for task at all times Adopt good hygiene practices. Work to this Method Statement {if found not to work stop and inform site management who will re-assess and issue a revised safe method of work} Work in a safe manner (Zero tolerance) 	<ul style="list-style-type: none"> Come to work under the influence of DRINK or un-prescribed DRUGS Take any shortcuts Interfere with any on-site processes that do not concern you UNLESS UNSAFE PRACTICES ARE AFFECTING YOUR WORK AREAS Walk past any unsafe working practices on site - report them immediately Use Mobile Phones except in Designated Safe Areas Smoke in the work area or any cabins

Systems for prompt and appropriate removal of any waste generated:

On a daily basis ensure all waste materials and debris is removed from any of the work areas including packaging material, plastic wrapping.

PREVENT ACCIDENTS with **GOOD HOUSE KEEPING** and stop trips, slips and falls ... **DON'T STAND FOR ANYTHING LESS**

Prepared by	Revision	Document
Mark Deven	V1	MD/2018-08
Project name:	Date	
Location or site:	Site Contact	
Organisation to do work:	Installation Supervisor	

Method Statement Title	CERTIFICATION OF HARDNESS TESTING MACHINES
------------------------	---

Emergency procedures:		
Event	Action to be taken	Emergency contact details
Fire:	<ul style="list-style-type: none"> • Kill power to machines being worked on and leave area by a safe route. • Go to muster point covered at site induction • Do not try to fight the fire unless you are trained in the correct use of fire extinguishers. • Supervisor will call 999 	Fire brigade 999
Accident: (indicating location of first aid facilities)	<ul style="list-style-type: none"> • Local First Aid provision should be covered by Site Induction 	Ambulance 999
Personal Injury	<ul style="list-style-type: none"> • If Applicable a first Aider will assess the injury and then if required appoint someone to call the Emergency services. • Provide Ambulance service with the site address and then instruct responsible person to wait at main gate to direct them into the required area 	<p>Site Address for Ambulance</p> <p>To be Confirmed</p>

**Method
Statement**

Prepared by	Revision	Document
Mark Deven	V1	MD/2018-08
Project name:	Date	
Location or site:	Site Contact	
Organisation to do work:	Installation Supervisor	

Method Statement Title	CERTIFICATION OF HARDNESS TESTING MACHINES
------------------------	---

Please sign below:

Work safely	Go home safely	Enjoy a long life
--------------------	-----------------------	--------------------------

All Personnel involved in this work have read and understood this Method Statement

Record of briefing of the personnel who are to undertake this work:
(Extend the table as necessary to record the briefing on any revisions in separate rows)

Briefing given by Supervisor		Signed:		Dated:	
		Signed:		Dated:	
		Signed:		Dated:	

No.	Forename	Surname	Role (in relation to this task)	Signature	Date
1.					
2.					
3.					
4.					
5.					
6.					
7.					
8.					
9.					
10.					
11.					
12.					