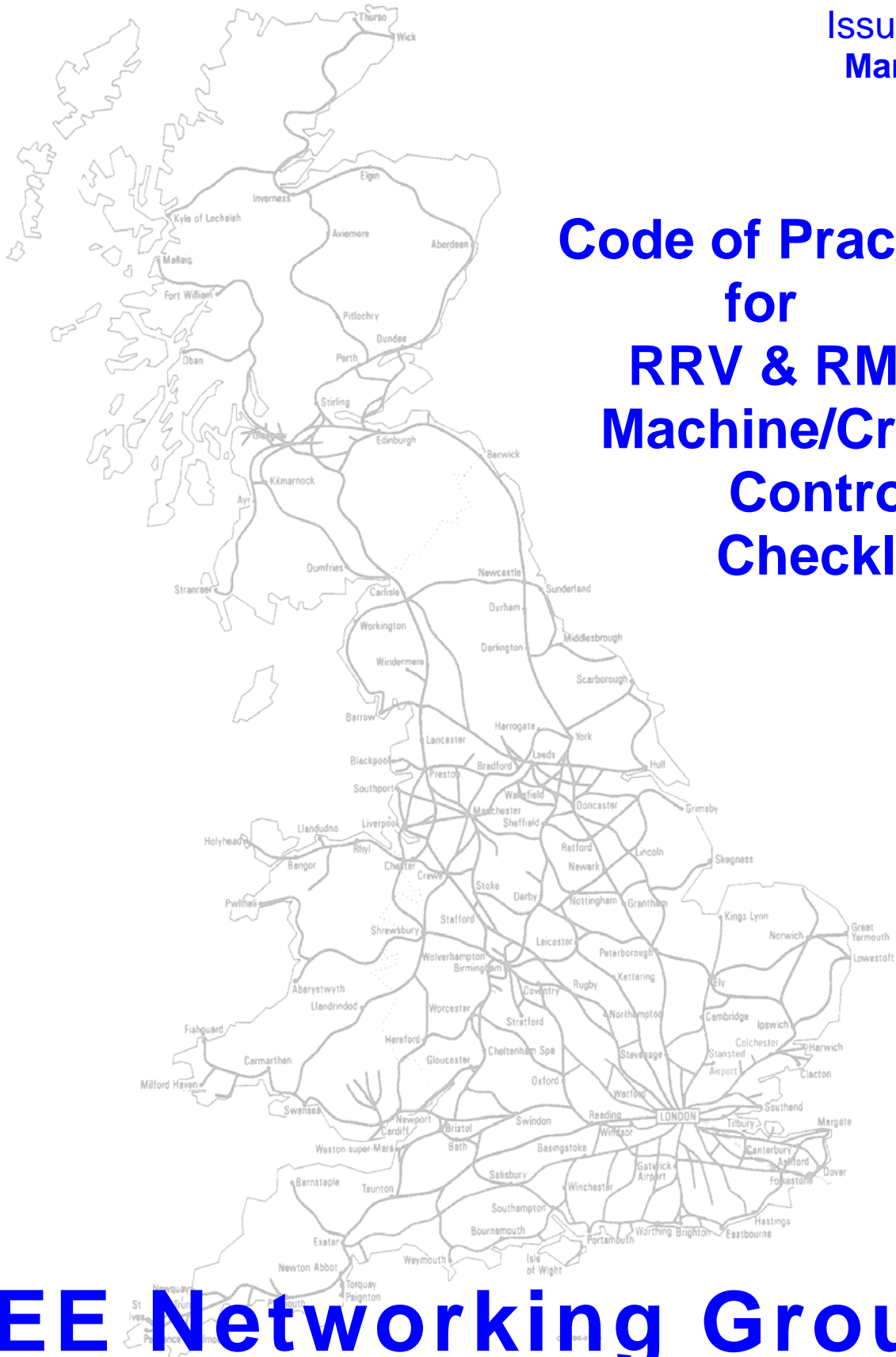


COP0016

Issue 2[a]
March 07



**Code of Practice
for
RRV & RMMM
Machine/Crane
Controller
Checklists**

M&EE Networking Group

Document revision history

Issue	Date	Reason for change
1	Jan 05	First issue (now withdrawn)
2[a]	Mar 07	Reviewed, amended and re-issued

BACKGROUND

A sub-group of the M & EE Networking Group have produced this Code of Practice which details the layout of the nationally approved Machine/Crane Controller pre-work, on-site, check lists.

GROUP MEMBERS

REPRESENTATIVE POSITION

Amec Spie Rail	<i>M. Sully</i>	Plant Engineer
Amey Infrastructure Services	<i>J. A. Maddy</i>	Mech. Assurance Eng.
Balfour Beatty Rail Plant	<i>Neil Wells</i>	STANDARDS COMPLIANCE
Carillion	<i>Spickenden</i>	Prof Head Plant Eng
First Engineering	<i>[Signature]</i>	Director of M&EE
Harsco Track Technologies	<i>[Signature]</i>	Engineering Manager
Jarvis Rail	<i>Stephen Government</i>	M&E Standards Eng
Grantrail	<i>Adam</i>	TECHNICAL MANAGER
Rail Plant Association	<i>[Signature]</i>	Managing Director
Seco-Rail	<i>K. J. [Signature]</i>	Head of Plant
RSSB	<i>M. James</i>	Principal Plant Engineer
Network Rail	<i>[Signature]</i>	HEAD OF RVE

Code of Practice agreed at M&EE meeting 15 March 2007

SUB-GROUP CONTACTS

Andy Ellis	Network Rail, 4B George Stephenson House, Toft Green, York YO1 6JT	Tel 01904 383003
Chris Sayers-Leavy	Network Rail, Floor 3, 40 Melton Street, Euston Square, London NW1 2EE	Tel 0207 557 8188
Steve Wadham	Gamble Group, Nowhurst Business Park, Broadbridge Heath, West Sussex RHJ12 3PL	Tel 01403 213716
Alan D Jones	Network Rail, The Axis, 10 Holliday Street, Birmingham, West Midlands B1 1TE	Tel 0121 654 4242

Purpose

This Code of Practice details a recommended standard industry RRV and RMMM Machine and Crane Controller checklist. This checklist has been produced to ensure a common format and requirement recognisable to all Machine and Crane Controllers carrying out their duties on Network Rail Controlled Infrastructure.

Scope

This Code of Practice concerns This Code of Practice applies to all activities involving Road-Rail Vehicles (RRV) and Rail Mounted Maintenance Machines (RMMM)

Definitions

1 Principle

- 1.1 Machine and Crane Controllers should complete a checklist for each machine.
- 1.2 Machine Controllers should complete the first two pages and Crane Controllers should complete all three pages.
- 1.3 Completed checklists are subject to audit and should be retained by the duty holder for a period of seven years.

Part A - Machine Controller Checklist RRV/RMMM

Note:- If not undertaking lifting operations only complete pages 1 and 2
 If undertaking lifting operations complete 1 to 3. Use page 2 for shift changeover (up to 3 shifts total)

Machine Controller Details				
Name		PTS Number		Expiry Date
RRV/RMMM Operator Details				
Name		C of C Number		Expiry Date
Location Details (Mileage/Signal/Point End etc)				
Possession Limits			to	
Worksite Limits			to	
Isolation Limits			to	
Lines under Possession				
Method Statement Number			Work plan Number	
Machine Details				
	RRV/RMMM	Trailer 1	Trailer 2	Other
Type and make				
Unique ID No				
Eng Acc Cert No				
EAC In Date Yes/No?				

Machine Controller Checklist (Machine Condition and Briefing)

Please circle the appropriate response. All answers must be **“Yes” (or “N/A” where the option is provided)** before any work is undertaken

M1	In your opinion is the operator fit for duty, (e.g. Drugs and Alcohol Policy), sufficiently rested and equipped with suitable PPE?	Yes / No
M2	Have you sufficient competent manpower to conduct the operations in accordance with that required and specified in the Method Statement?	Yes / No
M3	If you are the COSS have you carried out a COSS Briefing or If you are not the COSS have you and the work group received a COSS briefing?	Yes / No
M4	Have you briefed the operator on the requirements of the work and the factors that may influence the work within the Method Statement (including Communication arrangements?)	Yes / No
M5	Have all relevant staff been briefed not to travel on Machines and Trailers except where authorised on the engineering acceptance certificate and Method Statement?	Yes / No
M6	Where used are the Trailer(s)/attachment(s) compatible with the Host Machine and the maintenance brake test in date? (Note: if not being used tick N/A)	Yes / No N/A
M7	Have you suitable arrangements in place to tackle oil spills (Kits etc.)?	Yes / No
M8	Do you have immediate access to the appropriate protection equipment (e.g. Detonators, Flags, etc.) as required by the Rule Book	Yes / No
M9	Are correct On and Off tracking facilities available to machines that require them and conditions compliant to any machine limitations?	Yes / No
M10	Are Possession and Protection arrangements adequate for the operations planned for the protection of the site (including protection of the site, adjacent lines and level crossings where applicable)?	Yes / No

M11	Are all overhead cables (e.g. National Grid, telephone) suitably identified and marked by Goal Posts etc, if required by the Method Statement? (Note: if not required or no cables answer N/A)	Yes / No N/A
M12	Are side and overhead clearances adequate (are appropriate arrangements in place)?	Yes / No
M13	Is the site lighting adequate for the task to be performed?	Yes / No
M14	Has the operator completed the pre-start functional and operational checks on the machinery (including Trailers and Attachments) and is satisfied that it is safe to use (e.g. lights, horns, tyres, wheels, hoses, and brakes in order as applicable)?	Yes / No
M15	Have you witnessed a successful functional brake test (Host machine and where applicable, trailer(s) and/or attachments)?	Yes / No
M16	Have height and slew limits been set as required? (If not required tick N/A)	Yes / No N/A

Action notes from previous questions

ITEM	NOTES, COMMENTS
Signature of Machine Controller	Signature of Operator
Date	

Shift Changeover Section

Complete on Shift Changeover where no changes to the check list are required

Shift Changeover 1

M checks complete and all 'Yes' (or N/A where option is provided) Yes/No

L checks complete and all 'Yes' (or N/A where option is provided) Yes/No

Machine/Crane Controller

Operator

Name

Name

Signature

Signature

Time / Date

Time / Date

PTS number

C of C number

Shift Changeover 2

M checks complete and all 'Yes' (or N/A where option is provided) Yes/No

L checks complete and all 'Yes' (or N/A where option is provided) Yes/No

Machine/Crane Controller

Operator

Name

Name

Signature

Signature

Time / Date

Time / Date

PTS number

C of C number

Note : A new check list must be completed after 3 shifts

Note: Completed checklists to be retained by the duty holder for seven years (minimum)

Part B - Crane Controller's Section

Please circle the appropriate response. All answers must be **“Yes” (or “N/A” where the option is provided)** before any work is undertaken

L1	Is a valid Lifting Plan available?	Yes / No
L2	Does all the equipment provided meet the requirements of the lifting plan and are SWLs visible?	Yes / No
L3	a) Have you checked the equipment's lifting certification and found it to be in order?	Yes / No
	b) If the machine has an auxiliary lifting point(s) is it labelled correctly?	Yes / No
L4	Have you checked the lifting attachment point(s) to ensure they are fit for use?	Yes / No
L5	Have you checked the lifting accessories(LLT) and found them within examination date and fit for use?	Yes / No
L6	If changes are necessary to the Lifting Plans have they been revised by a competent person, approved as required by company procedures, and re-briefed?	Yes / No N/A
L7	Have you ensured that the RCI (where fitted) is correctly functioning and switched on for the operations you are supervising? (Only tick N/A where RCI is not fitted)	Yes / No N/A
L8	Have you checked that staff involved in the lift are competent for the duties to be undertaken?	Yes / No
L9	Have you briefed the staff on the requirements of the lifting plan and the factors that may influence the lift?	Yes / No
L10	Are conditions adequate for the lift (track stability and geometry)?	Yes / No
L11	Does your assessment of the load match the lifting plan including consideration of issues such as frozen ballast and track suction etc?	Yes / No

Note:- For Tandem Lifting complete a checklist for each Machine/Operator

Signature of Crane Controller		Signature of Operator	
Date			

Staff involved in the lifting operation

NAME OF STAFF	DUTY UNDERTAKEN	EMPLOYER	Sentinel Card No

Action/notes from previous questions

ITEM	NOTES, COMMENTS

Note: Shift Changeover section on page 2

Note: Completed checklists to be retained by the duty holder for seven years (minimum)