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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Purpose:** | | | | | To ensure team members participate in good safety practices whilst using the Stretch Wrapper. | | | | | | | | | | | |
| **Responsibilities:** | | | | | Butchery Personnel | | | | | | | | | | | |
| Personal Protective Equipment | | | | | | | | | | | | | | | | |
| **Safety Glasses** | **Gloves** | | **🗹**  **Safety Footwear** | | | **Ear plugs/Muffs** | **Face shields** | | **High Visibility Vest/Clothing** | **Safety Hat** | **Safety Harness** | **Protective Clothing** | **Safety Mask** | | **OTHER**  **Cold and Weather protection as required** | **NO PPE REQUIRED** |
| **Pre Start Checks** | | | | | | | |  | | | | | | **Potential Hazards** | | |
| * Dressed appropriately for work with correct PPE * Closed toed nonslip shoes * Work area clear to operate safely * No blockages * Floor clean and free of spillages * Fit for work * First aid kit on hand | | | | | | | |  | | | | | | * Contact with moving parts * Infeed and outfeed conveyors * Electrical hazards * Manual handing (repetitive tasks) | | |
| Procedure | | | | | | | | | | | | | | | | |
| Steps | | Instructions | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | |
| **1**  **Plan the work** | | | | * DO NOT operate the machinery without training * Ensure you are wearing any required PPE (apron, closed shoes), roll up sleeves, all loose clothing and tie back loose hair and clothing. * Check the wrapper is clean and operational with no blockages. * Ensure any electrical leads are in good condition and not in a position to be cut or damaged. * Ensure you have enough room for trays or containers * Ensure easy access to stop button | | | | | | | | | | | | |
| **2**  **Conduct the work** | | | | * Feed the trays onto the conveyor. Always keep your hands out of the opening. NEVER REACH INTO the wrapper. * Once work is complete turn off wrapper * Wash conveyor parts by hand and dry thoroughly. * Protective/cut-resistant gloves must be used whenever handling the Tenderiser Blades. | | | | | | | | | | | | |
| **3**  **Cleaning** | | | | * Power is turned off * Remove blades * Wipe down machine | | | | | | | | | | | | |
| **4**  **Safety Tips** | | | | * KEEP FINGERS CLEAR OF THE BLADES AT ALL TIMES. Failure to do so may result in personal injury. * DO NOT press or push meat into the Chute with your fingers or any other object. Doing so may cause personal injury and/or damage to the unit. * DO NOT immerse the Blades in sudsy water where they cannot be seen * NEVER use fingers to scrape food away from the Tenderizer while in operation. SEVERE INJURY MAY RESULT. * DO NOT push the Tongs or other utensils into the Blades. * NEVER LEAVE THE Tenderizer UNATTENDED. * NEVER use any accessories or parts from other manufacturers. * DO NOT attempt to tenderize or slice meat with bones or other hard items. Damage to the machine will occur. * REMOVE ties, rings, watches, bracelets, or other jewellery before operating. | | | | | | | | | | | | |

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| Training | | trainee I acknowledge and understand the SWP and the training I have received.  Trainer: The trainee has been told and **shown** what a compliant standard looks like when conducting this task safely, the key risks have been emphasised, and the requirements of the process have been clearly communicated. | | |
| Trainee Name: | | Trainee Signature: Payroll Number: Date: | | |
| Trainer Name: | | Trainer Signature: Payroll Number: Date: | | |
|  | |  | | |
| Competency | trainee: I have the knowledge and skills to undertake this task confidently and safely.  Trainer: The trainee has demonstrated confidence, understanding and competency in conducting this task safely. | | | |
| Trainee Name: | | | Trainee Signature: | Date: |
| Competent Person: | | | Competent Person Signature: | Date: |