

# TASK BRIEFING SHEET 02 – INTERNAL WORKS



## Principal Contractor – Construction Marine Ltd

Project Name : **Buildings 1-3 White Hart Lane Station**  
Arch Co Number : 10000321  
CML Job Number : 222T:0006  
Location: : Buildings beneath White Hart Lane Station, Love Lane,  
Tottenham, London, N17 8HG  
What 3 Words : snows.mass.funds  
Start Date: : 15.11.2022  
Completion Date: : 27.01.2023  
Work Package Plan No : 222T:0006/WPP/001  
Controlled Copy No : 222T:0006/WPP/001  
Construction Phase Plan Ref No. : 222T:0006/CP/001-Rev01  
Issue No: : 001

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SIGNATURE

JOB TITLE Project Manager CRE-c

CONTACT No: 07510500055

DATE PREPARED: 11/11/2022

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## Coronavirus COVID-19



### Know the signs

 **High Temperature**

 **Shortness of Breath**

 **Breathing Difficulties**

 **Cough**

For 8 out of 10 people, rest and over the counter medication can help you feel better.

If you have symptoms, self-isolate to protect others and phone your GP.

## Coronavirus COVID-19



### Help prevent coronavirus

 **Wash your hands**

 **Cover mouth if coughing or sneezing**

 **Avoid touching your face**

 **Keep surfaces clean**

 **Stop shaking hands and hugging**

 **Keep a safe distance**

The virus spreads in sneeze and cough droplets, so regularly taking the above measures helps reduce the chance of it spreading.

**• COVID-19 PRECAUTIONS**

- Wash your hands FREQUENTLY with soap and water. DO NOT touch your mouth, nose and eyes.
- Social distancing – Try to maintain a minimum distance of 2 metres from anyone else.
- Break times – Split break times so that social distancing is applied in the Canteen.
- The size of workgroups is to be kept to a minimum, this will be governed by the type of work being carried out and the workspace available, social distancing still applies wherever possible.
- Subcontractors - Where TVP's are required for subcontractors, the TVP's will be sent to the supervisor to observe and record.
- Keep the Canteen clean, wipe down surfaces before and after use and avoid unnecessary use.
- If you feel unwell or show any symptoms then call 111 and follow the Governments guidelines

## PART A

**Task Title:** Internal Works

**TBS Ref:** 02

### 1. Introduction

This Task Brief is identified within the WPP Schedule contained within Construction Phase Plan (CPP) for; Buildings 1-3 White Hart Lane Station

An outline of the work methodology for this work package is provided below:

### 2. Brief Description and Management of Task

#### **DESCRIPTION OF WORK**

*Brickwork repairs*

#### **AUTHORISING WORK**

Site manager/supervisor will brief the WPP'S and TB specific to the works ensuring all men have signed in to each document then the site team will carry out a point of work risk assessment ensuring the site whiteboard is displayed and relevant to the works.

Works will commence under the instruction of the site manager/supervisor following that all control measures are in place. Also ensuring all correct task specific P.P.E is always worn. i.e.; goggles, ear defender, dust masks, gloves and orange HI-VIZ clothing.

#### **METHOD OF WORK**

Works are carried out in an 'High Street Environment' and be completed both in day shifts from 07.30 – 17.30hrs

- Where working from Alloy Towers: these will be erected and checked off by the PASMA Operative prior to them being used.
- When raking out loose joints around the original brickwork a grinder and scraping hand tool are to be used. Only a competent person to use power the power tools.
- The loose pointing is to be raked out at a depth of between 10-15mm.
- When re-pointing, a mix of 3 soft sand, 1 sharp sand and 1 cement is to be used. The mortar finish is to match the existing in colour and profile.
- The pointing of higher areas of brickwork is to be done from a mobile tower provided.
- The pointing is to be applied and finished with a pointing trowel.
- If for any reason any of the works cannot be completed or they are any unsafe issues on site that require addressing apply TAKE 5 for safety and re assess ensuring the PM/SM is notified.

### 3. Handover Arrangements

N/A same team

Upon completion of all works the area will be left clean & tidy

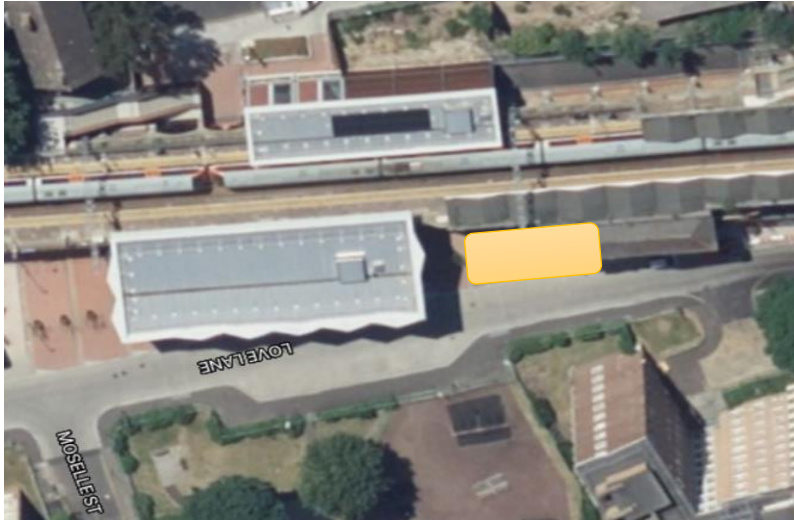
### 4. Control of Site and Activity Risks

| Hazards / Risks                              | Controls                                                                                                                                                                                                                                                                                                                          |
|----------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Construction Environment<br>- Infrastructure | WPP in Place - Plan Works (RAMS)<br>Experienced / Competent work force<br>Standard NwR PPE as a minimum<br>If any work strays from the methodology detailed in the WPP– work must cease immediately, and the work process must be reviewed.<br>Working Party must be fit to work and not under the influence of drugs or alcohol. |



| 5. Resources             |                                                    |      |
|--------------------------|----------------------------------------------------|------|
| Staff / Operatives       |                                                    |      |
| No. of Personnel         | Competences Required                               | Task |
| 1 x Site Manager – CML   | SMSTS – First Aid                                  | 02   |
| 1 x CRS Supervisor       | SMTS – 1 <sup>st</sup> AID Competent and appointed | 02   |
| 2 x CRS Operatives       | CSCS Competent and appointed (inc 1 PASMA)         | 02   |
| Plant, Equipment & Tools |                                                    |      |



| 6. Site details relevant to Task                                                                                                                                            |                                                                                                                    |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------|
| <ul style="list-style-type: none"> <li>Location</li> </ul> <p><b>Welfare Unit -</b></p>  | <p>White Hart Lane Station</p>  |
| a. Safest Access & Egress Point                                                                                                                                             | Love Lane, off White Hart Lane                                                                                     |
| b. Our Workforce Protection Arrangements                                                                                                                                    | High street environment                                                                                            |
| c. Safeguarding Others from our work                                                                                                                                        | Access and egress gate always locked<br>Access & egress and the compound secured with Herras fencing.              |
| d. Permit/s                                                                                                                                                                 | Permit to Dig / Hot Works / PTW                                                                                    |
| e. Plant and machinery Movements                                                                                                                                            | Delivery wagon                                                                                                     |
| f. Communication                                                                                                                                                            | Mobile telephones will be utilised.                                                                                |



|                                  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |
|----------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <p>g. Emergency Arrangements</p> | <p>First Aid will be available at the location of the works.</p> <p>The onsite First Aid appointed person for these works will be:</p> <p>Hospital Name; <b>North Middlesex University Hospital</b></p> <p>Hospital Address; <b>Sterling Way, London N18 1QX</b></p> <p>W3W; <b>hulk.rainy.blocks</b></p> <p>Hospital Telephone Number; <b>020 8887 2000</b></p> <p>Number of First Aiders; <b>2</b></p> <p>Locations of First Aid Equipment; <b>Welfare Unit</b></p> |
| <p>h. Welfare</p>                | <p>Welfare Unit</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                   |

## 7. Take 5 for Safety

|                                                                                                                     |                                                                                |
|---------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------|
| <p>What task did you Take 5?</p>  | <p><u>Summarise the task</u></p>                                               |
| <p>Were any hazards / risks identified?</p>                                                                         | <p>Note any hazards identified by you and your team</p>                        |
| <p>What changes were made and re-briefed to the team?</p>                                                           | <p>Summarise the changes made to eliminate / reduce the hazards identified</p> |

## 8. Changes to the Task Briefing Sheet

### a. Record of Change

State which section/s in the box below.

If any of the details in this briefing sheet do not match circumstances on site, record the differences and what change/s will need to be made.

**Seek authorisation before implementing change/s.**

**Record here any changes;**

# TASK BRIEFING SHEET 02 – INTERNAL WORKS



|                                 |                                                                                                                               |
|---------------------------------|-------------------------------------------------------------------------------------------------------------------------------|
| <b>b. Change authorised by:</b> | <b>Write here the name of the responsible person that has authorised the change/s.</b><br><br><b>Authorisation reference:</b> |
|---------------------------------|-------------------------------------------------------------------------------------------------------------------------------|

|                                   |     |
|-----------------------------------|-----|
| <b>PART B</b>                     |     |
| <b>Principal Contractor:</b>      | CML |
| <b>Responsible Contractor(s):</b> | CRS |

|                             |  |  |  |
|-----------------------------|--|--|--|
| <b>Task Briefing Record</b> |  |  |  |
|-----------------------------|--|--|--|

|                                  |                                                  |
|----------------------------------|--------------------------------------------------|
| Task Title and Reference         | Internal Works – TB02                            |
| Work Package Title and Reference | Please refer to WPP01 Listed in the Introduction |

|                                                                                                                                                                                                                                          |  |  |  |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|--|
| <b>Briefer's declaration:</b>                                                                                                                                                                                                            |  |  |  |
| The briefer confirms they are satisfied with the TBS and the information is correct. Suitable risk controls are in place as detailed in the TBS. I have confirmed the workgroup understands the briefing before any work is carried out. |  |  |  |

|                           |  |  |  |
|---------------------------|--|--|--|
| <b>Briefing given by:</b> |  |  |  |
|---------------------------|--|--|--|

| Name | Contact Number | Position | Signature |
|------|----------------|----------|-----------|
|      |                |          |           |

By signing below, I confirm that I have received and understood the briefing for this task. If the TBS briefing does not cover your activity, risks, or the controls are not in place as described in the TBS, do not sign this sheet and report it to the briefer immediately and submit a close call.

| Print Name | Contact Number | Signature | Date |
|------------|----------------|-----------|------|
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