

Florida Trail Association Project Paperwork Summary



Below is a list of forms required to be completed for FTA trail work projects. Crew Leaders are responsible for making sure the paperwork has been completed and the work is recorded in the volunteer hour entry system or is sent to the appropriate chapter official once the project ends.

Form Name	Purpose	Procedure
Volunteer Profile	Tracks individual volunteer hours and certifications.	Crew Leader: Make sure all volunteers fill out a profile online before your project OR have them fill one out on site. If filled out onsite, you will need to fill out a profile for them online or send the hard copy to FTA.
Trailhead Communications Plan (TCP)	Provides important logistical information in the event of an emergency.	Crew Leader: Make two copies of this sheet, one for the Communications Lead and one for Situation Manager. Update and re-use for future projects at same location.
Volunteer Sign-In Sheet/ Assumption of Risk	Releases FTA of liability.	Crew Leader: Responsible for making sure each volunteer signs in at the trailhead. Mail to FTA
Emergency Action Plan (EAP)	Delegates leadership roles in the event of an emergency.	Crew Leader: Assigns First Aid Lead, Communications Lead and Situation Manager. Recycle once project is completed
Tailgate Safety Session (TSS)	Provides a checklist of important topics to cover with your crew	Crew Leader: Use checklist to cover all pertinent project information for your crew. Recycle once project is completed
Job Hazard Analysis (JHA)	Ensures volunteers receive the information on task to be performed, possible hazards related to tasks, and abatement actions. Will include one or more of the following: - Trail Maintenance - Mower and Brushcutter Chain Saw Use - Crosscut Saw Use - Rigging - Canycom - COVID-19	Crew Leader: responsible for making sure each participant has signed appropriate JHA. Mail to FTA once project is completed
Project Report Form	Provides FTA with volunteer hours and project accomplishments.	Crew Leader: Fill out the hard copy and enter into hours entry system or send to designated chapter admin to report OR mail form to FTA Tallahassee ASAP (Can be submitted as an electronic Excel or PDF file via email).



Florida Trail Association Volunteer Profile



Contact Information

First Name	_M.I	_Last Name	
Mailing Address			
City	State _		_ Zip Code
Primary Phone			_Email
18 or older Yes No	Race/Ethnicity	(optional)	
Password(for future ability to view profile online)		
Voluntary Dietary Information (all	information is ke	ept confidential)	
Allergies:			
Dietary needs or foods and drinks that y	ou prefer to include	or exclude from you	diet? If none, please write none.
Emergency Contact Information			
Name		Relation	
Cell Phone			ork Phone
Other Information			
Are you a member of the Florida Trail A	Association? Yes	□ No □	
T-shirt size?			
How did you hear about our volunteer o			
—— FTA Website	Friend/Fam	nilv Memher	
	—— Local News	•	
—— FTA Recruiting/Booth Event		,	_
What region would you like to voluntee	r in 2 (Choole all that	annlu)	
What region would you like to voluntee	•	арріу)	
——— Panhandle ———	_ Central		
North	_South		
Affiliation:(FTA Chapter or local group)			

Certifications

Are you certified in any of the following:	
Certification	Expiration
First Aid/CPR	
Wilderness First Aid	
Wilderness Advanced First Aid	
Wilderness First Responder	
WEMT	
Chain Saw: S212-Bucking and Limbing	
Crosscut Saw: S212– Bucking and Limbing	
FTA Activity Leader	
Volunteer Interests and Experience	
What volunteer positions interest you? (Check all that apply)	
Trail MaintainerTrail Scouting	& Project Planning
Trail Crew CookOffice Adminis	tration/Events
Trail Crew Leader GPS Coordinate	cor
Do you have any experience with any of the following? (Check a	all that apply)
General Trail MaintenanceBusiness Lead	ership and/or managemer
Trail Design and ConstructionLeading Crews	s or Groups
Rigging/GriphoistGIS Mapping	
Briefly describe your hiking, camping, and backpacking experier	nce.
Briefly describe your ability to use hand tools and perform ardu	ous, manual labor.
What are you expecting from your experience while volunteering	g on the Trail?
Is there anything else you would like us to know about you?	



Florida Trail Association Trailhead Communications Plan (TCP)



Crew Leader: Fill this out BEFORE arriving at trailhead. Bring two copies. At trailhead, give one copy to Communications Lead and put the other in the First Aid Kit (keep with a pen in a sealed waterproof bag.)

Agency Contact Information	
Business Hours Contact:	Phone Number:
After Hours Contact:	Phone Number:
Dispatch:	Phone Number:
FTA Contact:	Phone Number:
Project Information	
Trailhead and County:	Best Location for
Date/Time Going In:	Reception Near
Date/Time Coming Out:	Worksite:
Crew Leader Name:	Crew Leader Cell #:
Gate Code/Combination:	
Location Information	
Name of Trailhead:	Road and Milepost:
Nearest Intersection:	County and State:
GPS Coordinates:	Nearest Town/City:
Helicopter Landing Spot:	Township and Range:
Transport Injured to:	
Nearest Hospital:	Distance from Trailhead:
Hospital Phone Number:	Hospital Address:
Driving directions from trailhead:	
Cell Phone Instructions	Other Pertinent Information
911 calls from cell phones can land in a far-away regional center. The call-taker needs the following information immediately: - Your wireless phone number in case disconnected - The location you're calling from. See below. - What type of emergency you have (medical, require ambulance; injury specifics)	
In addition to 911, if you might need a helicopter. List local medical helicopter phone number(s) here:	



Florida Trail Association Emergency Action Plan (EAP)



(Complete with volunteers at each Tailgate Safety Session)

Crew Leader: Delegate the following roles at the trailhead. This limits confusion that can accompany a serious accident. Show everyone where the EAP is kept, in case you become incapacitated.

Title	Volunteer Assigned	Duties
Situation Manager		Usually the Crew Leader
Alternate Situation Manager		
First Aid Lead		Most medically experienced in crew; carries first aid kit and takes notes
Communications Lead		Carries radio/cell phone, ensures it is charged, tuned, and ready; carries Trailhead Communication Plan, calls for assistance

IN THE EVENT OF AN EMERGENCY, FOLLOW THESE STEPS:

- 1. The First Aid Lead initiates care for the patient(s). Get patient's medical and emergency contact information from Crew Leader. Write medical or SOAP notes.
- 2. Communications Lead uses Trailhead Communications Plan (TCP) and calls 911 or Dispatcher if needed. Relay pertinent medical or SOAP notes written by the First Aid Lead.
- 3. Evacuate, send medical and emergency contact information and medical or SOAP note with patient.
- 4. Get emergency treatment by a medical provider, if needed. (Inform agency authorities and FTA first, if possible. See Volunteer Injury Instructions: Treatment Procedures for details.)
- 5. Report injury to agency authorities and FTA. In non-emergency situations, this notification occurs before formal medical care is sought. See Volunteer Injury Instructions for FTA Contacts. Agency contacts are listed on TCP.
- 6. Contact the individual named on the injured person's sign-up sheet.
- 7. Documentation. At a minimum, a form CA-1 (Report of Injury) should be completed by the injured party for all injuries (even if medical treatment is not sought); and witness statements should be included. All injuries should be reported within 24 hours of occurrence.



Florida Trail Association Tailgate Safety Session



The Tailgate Safety Session is intended to assist FTA Crew Leaders in addressing all pertinent aspects of a project with their crew. FTA Crew Leaders are responsible for ensuring that all volunteers know what is expected of them on an FTA project. Crew leaders should gather participants to discuss appropriate behavior, set parameters for the project and discuss with their crew how to handle an emergency situation. During the first day of the project the Tailgate Safety Session and all project paperwork must be completed. In the event that the project will span multiple days, FTA recommends that crew leaders debrief the crew each day and address safety and communication procedures as they arise.

	Orientation and Welcome
	Crew Leader introduces his/herself. Ask all volunteers to do the same and share a bit about themselves and why they are there.
	Brief volunteers on what the project objective is, start and finish times, breaks, and what type of work will be done
	Have a map available. Show volunteers where they are. Address escape routes, access points, camp and worksite locations
	If it is a multi-day project, brief volunteers on camp etiquette, bathroom or living facilities, and who to ask if they need something
,	Emergency Preparedness:
	Designate a Situation Manager, 1st Aid Lead, and Communication Manager (see Emergency Action Plan EAP)
	How will you get your participants to medical attention if they are sick or injured?- Review Trailhead Communications Plan (TCP)
	All Volunteers must sign FTA's Assumption of Risk
	Fill out and sign appropriate JHA (s)
	Are there medical conditions the Crew Leader should know about? Ask Your volunteers- (allergies to bee stings, seizures?)
	Identify who is carrying first aid kits, their basic contents, where they are located, and what they look like
	Check for cell service and notify appropriate agency personnel or FTA staff person before doing work on the trail
	B. and Bratanilla Emiliary (BBE).
	Personal Protective Equipment (PPE): Hard hats, sturdy footwaar, gloves, long pants, eve protection, long sleeves and other project specific protection.
\blacksquare	Hard hats, sturdy footwear, gloves, long pants, eye protection, long sleeves and other project specific protection Chainsaw: (see JHA) axe, wedges, chaps, hard hat, 8" leather boots, saw kit, long pants/sleeves, trauma kit
	Chainsaw: (see JHA) axe, wedges, chaps, hard hat, o heather boots, saw kit, long parits/sieeves, tradina kit
	Tool & Safety Talk:
	Explain and demonstrate the correct use of each type of tool or piece of equipment
	Address environmental and project specific hazards (widow makers, snakes, lifting procedures, etc.)
	Have all equipment and tools been properly maintained and in correct working order?
	Depending on activity, stay a minimum of 10 feet from other volunteers with tools (farther if operating machinery)
	Ask permission to pass, "bumping by" or "coming behind"
	Announce to the group when beginning work with machinery or swinging tools
	Keep track of each other. Tell a buddy if going off trail for any reason
	Don't overwork, take breaks, make sure no one has the "umbles" (mumbly, stumbly, grumbly)- hydrate, eat, rest
	Do volunteers need sun protection, insect protections, weather appropriate clothing, weather appropriate shelter?
	Do all participants have sufficient food, water, and personal medication?
	Are there questions, problems, other site or project specific concerns?
	Ale there questions, problems, other site or project specific concerns.
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Toll free: 1-877-HIKE-FLA Local: 352-378-8823

FLORIDA TRAIL ASSOCIATION, INC. ASSUMPTION OF RISK and SIGN IN SHEET

www.floridatrail.org fta@floridatrail.org

and do hereby assume the above-mentioned risks and will hold Florida Trail Association, Inc., and the Activity Leader(s) listed below: in hikes or other Association activities. Neither the Association nor landowners are in any way liable for any injury or illness I might sustain while participating in an Association activity. I will agrees to hold harmless and free from blame the Activity Leader(s) and the Association, its officers, directors, and members, for any accident, injury, or illness which might be sustained from participating Certain risks are inherent in any Florida Trail Association, Inc. (the "Association") activity. Each Association member, guest, or non-member participant agrees to accept personal responsibility for his or her safety, and the safety of minors accompanying such persons. The Association cannot ensure the safety of any participant on hikes or activities. In participating in Association activities, each such person

Name(s) of Activity Leader(s) & Phone numbers

photographs taken of me on this hike may be used to publicize the Florida Trail Association. harmless from any and all liability and claims of every kind and nature whatsoever, which may arise from or in connection with my participation in those activities. I also agree that any

			1)	2)	3)	4)	5)	6)	7)	8)	9)	10)
Activity Day & Date	I DO HEREBY CERTIFY B'	Printed Name of Participant										
	Y MY SIGNATURE THAT I HA NOTE: Signature of par	Signature of Participant Do NOT Sign until day of Activity										
Activity Title	I DO HEREBY CERTIFY BY MY SIGNATURE THAT I HAVE READ, DO UNDERSTAND, AND DO AGREE T NOTE: Signature of parent/guardian is required if participant is under 18 years of age.	Address										
	AND DO AGREE TO THE TERMS OF THIS DOCUMENT: sunder 18 years of age.	Telephone & E-mail										
	OF THIS DO	FTA MEMBER? (Y/N)										
	CUMEN	Travel Miles (One Way)										
	T:	Recorded by event leader: Hours Worked										

Send the completed original form to the Florida Trail office at: Florida Trail Association, 1022 NW 2nd Street Gainesville, FL 32601 If there are more participants than spaces on this form, use a second form. DO NOT use the back of this form.

U.S. Department of Agriculture FS

JOB HAZARD ANALYSIS (JHA): References-FSH 6709.11-12

WORK PROJECTIACTIVITY General Trail Maintenance under 12-VI-11080500-005

4. NAME OF ANALYST: Shawn Thomas

2. LOCATION: Florida National Scenic Trail

5. JOB TITLE: FNST Adminstrator

3. UNIT: NF's in FL

6. DATE PREPARED 11-29-2018

12. DATE	7 II. TITLE Forest Supervisor	THE PARTY OF THE P	FICHESION	10. LINE OFFICERS
Be sure to leave your itinerary with someone that includes where you will be working and your expected return. Some agencies may require that you check in before the project and check out after the project with a designated representative.* Know the location of the closest hospital and the closest road intersection or easily identifiable meeting point where an ambulance can reach.* Inform crew members of these locations before beginning work activity.* In an emergency situation call 911 FIRST, then contact designated FTA or Agency partner staff.	 Be sure to leave your itinerary with someone that incl and check out after the project with a designated repres an ambulance can reach. Inform crew members of the Agency partner staff. 	Be sure and chec an ambul Agency i	Check-in out	Emerg. Response
 Carry a cell phone with a fully charged battery, but be aware that cell phones do not work along many sections of FNST.* Know the location of the nearest working land line and spot with cell phone reception.* If available, carry a satellite phone.* Radios are generally not available, but some agency partners may be able to provide them. * Ensure radio has properly programmed frequencies, is in working order, and has an extra set of batteries.* Know repeaters and best locations to radio during an emergency.* Know dispatch hours as they may not be regular evenings/ weekends. 	 Carry a cell phone with a fully charged battery, but be spot with cell phone reception. If available, carry a sat properly programmed frequencies, is in working order, they may not be regular evenings/ weekends. 	Carry a spot with properly they may	Phones Radios	Communic ation
Wear Hunter's Orange during hunting season. Post signs near work sites to warn hunters of employee and crew locations. Reschedule jobs to work outside of hunting season ates when possible	 Wear Hunter's Orange during hunting season. Post si dates when possible 	Wear H dates wh	User Conflict '	Hunting Season
• Carry tools on the downside hill side with scabbard or cover on.• Carry sharpened edge of tool downward and away from your body.• Be aware of others around you and space yourselves when hiking.• Do not carry tools on shoulders with the exception of crosscuts.•Properly maintain and care for tools. Keep tools sharp. Do not use a tool with a loose handle.• Wear proper PPE at all times.• Be aware of others working around you.• Have firm footing and be balanced when swinging.• Never throw a tool.• When not in use, shield any sharp edges. • Watch for loose limbs.• Be careful of standing dead trees and snags.• Avoid working at any unsafe site. Ensure all crew members are aware of hazard.	 Carry tools on the downside hill side with scabbard or cover on. Carry sharpened edge of typurselves when hiking. Do not carry tools on shoulders with the exception of crosscuts. Prhandle. Wear proper PPE at all times. Be aware of others working around you. Have firm any sharp edges. Watch for loose limbs. Be careful of standing dead trees and snags. Avoid working at any 	Carry tools on yourselves when handle. Wear p any sharp edges. Watch for loos	Sharp Tools Tool Use Overhead	
Identify crew members who are allergic and keep them out of work environments where plants are present.* Educate crew members on how to identify poisonous plants.* wear gloves when working in brush.* Be able to identify signs of a reaction, immediately treat skin and clothing.	y crew members who are allergic and keep the hen working in brush. • Be able to identify sign	Identify gloves w	Poison Ivy Sumac	Ĭ,
Identify crew members with sting allergies and carry sting kits containing epinephrine. Be aware of potential for hives in brush or hollow logs, but also in the ground. Use appropriate insect repellants on skin and clothing. Clothing should fit tightly at wrists, ankles and waist. Tuck in shirt tails. Inspect your skin daily for ticks and insects, bathing or changing clothes after every work day. Remove embedded ticks properly and seek treatment promptly if tick-borne illness develops later.	y crew members with sting allergies and carry ate insect repellants on skin and clothing. • Clo g clothes after every work day. • Remove embe	Identify appropris changing	Biting and Stinging Insects	
• Identify safe routes and local conditions. • Hike in a group. Designate a meeting spot should someone become separated. If one has to depart from the trail, advise the crew. • Make sure visual contact is kept at forks in the trail. • Avoid hiking in the dark • Wear appropriate hiking boots and socks. • Take in to account terrain, especially water, the work and the weather. • Watch for snakes, under logs, shady areas or sunning in open areas. Look before stepping over logs. • Be able to identify venemous snakes. In case of a bite, provide first-aid and seek medical attention immediately. Do not attempt to remove the venom by biting or cutting the area. • Be "Bear Aware" and use proper food storage devices and techniques.	 Identify safe routes and local conditions. Hike in a group. Designate a meeting spot shou sure visual contact is kept at forks in the trail. Avoid hiking in the dark. Wear appropriate I weather. Watch for snakes, under logs, shady areas or sunning in open areas. Look before aid and seek medical attention immediately. Do not attempt to remove the venom by biting techniques. 	• Identify s sure visual weather.• \ aid and see techniques	Getting Lost Foot Damage Animals	1.1
Know the weather forecasts. You can experience rain, lightning, sudden flooding, extreme heat and extreme drops in temperature on the FNST. Be watchful throughout the day or changing weather. Take appropriate multi-season gear and additional clothing.	 Know the weather forecasts. You can experience rain, lightning, sudden flooding for changing weather. Take appropriate multi-season gear and additional clothing. 	• Know t	Weather	1
Be aware of your surroundings and watch where you step. Look over head for dead limbs and dead hung-up limbs (widow-makers). Look for root-sprung trees and snags. Be aware of and prepared for water crossings and swamps. When fording streams use a walking stick for an extra point of contact to provide stability, undo hip belt so pack can be shed if it snags or pulls you under water. Maintain a safe walking distance between people (10 feet minimum). Always sheath tools and carry them on the downhill side of the trail. The person carrying the crosscut saw, or pole saw should walk last. Wear protective clothing such as long-sleeve shirt, long pants, helmet, work gloves and eye cover to protect against heavy brush.	 Be aware of your surroundings and watch where you saware of and prepared for water crossings and swamps. If it snags or pulls you under water. Maintain a safe wa person carrying the crosscut saw, or pole saw should wa heavy brush. 	Be aware of aware of and if it snags or person carry heavy brush	Surface Conditions Trail Hazards Carrying	Work on the Trail
• Increase fluids on hotter days or during extremely strenuous activity. Drink as much as I quart of water per hour when temperature is above 80 degrees.• Drink water from a municipal source, if none is available, use proper filtration/treatment methods including boiling for I minute, using a chemical treatment such as iodine tabs, or using a water filtration pump designed for the backcountry. • Review map or ask crew leader about water sources, keeping in mind their seasonality.• Observe team members for signs of dehydration and be able to recognize the signs and symptoms of heat cramps, exhaustion and stroke. Treat immediately once recognized.• Take frequent brakes in the shade as a form of prevention.• Remember that heat stroke is a medical emergency requiring evacuation.	 Increase fluids on hotter days or during extremely strenuous activity. Drink as much as I que municipal source, if none is available, use proper filtration/treatment methods including boilin filtration pump designed for the backcountry. Review map or ask crew leader about water so dehydration and be able to recognize the signs and symptoms of heat cramps, exhaustion and form of prevention. Remember that heat stroke is a medical emergency requiring evacuation. 	 Increas municip filtration dehydrat form of j 	Dehydration Heat Illness Contaminate d Water	Hiking on the Trail
stitution * Administrative Controls * PPE	9. ABATEMENT ACTIONS: Engineering Controls * Substitution * Administrative Controls * PPE	9. ABA	8.HAZARD	7. TASK

The JHA shall identify the location of the work project or activity, the name of employee(s) involved in the process, the date(s) of acknowledgment, and the name of the appropriate line officer approving the JHA. The line officer acknowledges that employees have read and understand the contents, have received the required training, and are qualified to perform the work project or activity.

Blocks 1, 2, 3, 4, 5, and 6: Self-explanatory.

- Block 7: Identify all tasks and procedures associated with the work project or activity that have potential to cause injury or illness to personnel and damage to property or material. Include emergency evacuation procedures (EEP).
- Block 8: Identify all known or suspect hazards associated with each respective task/procedure listed in block 7. For example:
- a. Research past accidents/incidents.
- b. Research the Health and Safety Code, FSH 6709.11 or other appropriate literature.
- Discuss the work project/activity with participants.
- d. Observe the work project/activity.
- A combination of the above.
- Block 9: Identify appropriate actions to reduce or eliminate the hazards identified in block 8.

 Abatement measures listed below are in the order of the preferred abatement method:
- Engineering Controls (the most desirable method of abatement). For example, ergonomically designed tools, equipment, and furniture.
- Substitution. For example, switching to high flash point, non-toxic solvents. Work Leader
- Administrative Controls. For example, limiting exposure by reducing the work schedule; establishing appropriate procedures and practices.
- d. PPE (least desirable method of abatement). For example, using hearing protection when working with or close to portable machines (chain saws, rock drills, and portable water pumps)
- e. A combination of the above.
- Block 10: The JHA must be reviewed and approved by a line officer. Attach a copy of the JHA as justification for purchase orders when procuring PPE.

Blocks 11 and 12: Self-explanatory.

Work supervisors and crew members are responsible for developing and discussing field emergency evacuation procedures (EEP) and alternatives in the event a person(s) becomes seriously ill or injured at the worksite.

Be prepared to provide the following information:

- Nature of the accident or injury (avoid using victim's name).
- Type of assistance needed, if any (ground, air, or water evacuation).
- c. Location of accident or injury, best access route into the worksite (road name/number), identifiable ground/air landmarks.
- d. Radio frequencies.
- Contact person.
- Local hazards to ground vehicles or aviation.
- Weather conditions (wind speed & direction, visibility, temperature).
- Topography.
- Number of individuals to be transported.
- Estimated weight of individuals for air/water evacuation.

The Items listed above serve only as guidelines for the development of emergency evacuation procedures.

JHA and Emergency Evacuation Procedures Acknowledgment

We, the undersigned work leader and crew members, acknowledge participation in the development of this JHA (as applicable) and accompanying emergency evacuation procedures. We have thoroughly discussed and understand the provisions of each of these documents:

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U.S. Department of Agriculture Forest Service	1. WORK PROJECT/ACTIVITY Mower and Brushcutter Operation under 12- SV-11080500-005	r Operation under 12-	2. LOCATION Florida National Scenic Trail	3. UNIT NF's in FL
JOB HAZARD ANALYSIS (JHA)	4. NAME OF ANALYST		5. JOB TITLE	6. DATE PREPARED
References-FSH 6709.11 and -12	Shawn Thomas		FNST Administrator	02-07-2019
7. TASKS/PROCEDURES	8. HAZARDS	Engineerir	9. ABATEMENT ACTIONS Engineering Controls * Substitution * Administrative Controls * PPE	trols * PPE
Pre-use Inspection of Equipment	Loose objects	 Inspect equipment bla or missing parts. Reference 	 Inspect equipment blades, sheels, guards, handle and engine for loose, worn, broken or missing parts. Reference equipment operations manual for parts and maintenance. 	r loose, worn, broken
Operator	Lack of familiarity with equipment	 New operators should ference owner operation 	 New operators should be trained on-site by experienced operators, review and ference owner operation manual. No one should operate equipment alone. 	ors, review and ent alone.
Fueling Area	Spills, Fire	 Allow equipment to cool fe Use fuel spout or funnel. It properly marked fuel contain Clean up spills and flush frignition sources or smoking. 	 Allow equipment to cool for at leat 5 minutes before re-fueling. Use fuel spout or funnel. Ensure correct fuel mixture. Fill only from known and properly marked fuel containers. Wear eye protection to prevent splash to eyes. Clean up spills and flush from skin. Protect fueling area for at least 25 feet from ignition sources or smoking. 	ly from known and splash to eyes. t least 25 feet from
Work Area	Damage to mower, injury to operator or bystanders Slopes	Clear area of all person that should be removed Stop operation to allow modified. Equipment s The center of gravity f	 Clear area of all personnel and inspect route to be travelled for downed trees, debris that should be removed from equipment path or provide tripping hazard. Stop operation to allow people to pass as needed. Guards shall never be removed or modified. Equipment shall not be operated on slopes exceeding 30%. The center of gravity for equipment varies greatly and trail terrain is apt to change. 	downed trees, debris hazard. I never be removed or 30%.
Maintenance	Prevention of hazards and bodily harm	 Out of service equipm Review manufacturer's annually, and as needed repair. 	 Out of service equipment must be clearly marked while stored. Review manufacturer's recommended maintenance procedures and complete annually, and as needed. At minimum, remove sparkplug wire before service or repair. Wear appropriate PPE including; eye protection, gloves, long sleeved shirts 	and complete sefore service or long sleeved shirts
Operating Equipment	Bodily injury, cuts	 Keep hands and feet from une PPE including; eye protection, boots with sturdy sole, and cut equipment. 	 Keep hands and feet from under mower and away from cutting blades. Wear proper PPE including; eye protection, gloves, hardhat, hearing protection, long sleeve shirt, boots with sturdy sole, and cut resistant material • Never lift or tip a running piece of equipment. • Turn off before clearing debris or making adjustments. 	blades. Wear proper n, long sleeve shirt, p a running piece of nts.
Loading mowers in to truck or trailer	Back injury or bodily harm	 Lift with legs, not back Ensure trailer/ramps at 	 Lift with legs, not back, always use two people with a firm hold. Ensure trailer/ramps are in good working condition and properly secured. 	y secured.
Trailer Towing	Vehicle Damage	 Park where backing is walk around vehicle bef 	 Park where backing is not necessary. Set parking brake, block tires if on a slope walk around vehicle before backing and use a spotter if backing is necessary. 	tires if on a slope. s necessary.
See- Trail Maint. JHA, Trailhead Specific Comm. Plan (TCP) and EmeResponse Plan (ERP)		Refer to the FNST General T environmental hazards, hiking a communication and emergency	 Refer to the FNST General Trail Maintenance JHA for hazards and mitigation for environmental hazards, hiking and working in the backcountry, and also communication and emergency response 	and mitigation for nd also
10. LINE OFFICER SIGNATURE		11. TITLE Forest Supervisor		12. DATE
Previous edition is obsolete				10 10

JHA Instructions (References-FSH 6709.11 and .12)

The JHA shall identify the location of the work project or activity, the name of employee(s) involved in the process, the date(s) of acknowledgment, and the name of the appropriate line officer approving the JHA. The line officer acknowledges that employees have read and understand the contents, have received the required training, and are qualified to perform the work project or activity.

Blocks 1, 2, 3, 4, 5, and 6: Self-explanatory.

Block 7: Identify all tasks and procedures associated with the work project or activity that have potential to cause injury or illness to personnel and damage to property or material. Include emergency evacuation procedures (EEP).

Block 8: Identify all known or suspect hazards associated with each respective task/procedure listed in block 7. For example:

- Research past accidents/incidents.
- b. Research the Health and Safety Code, FSH 6709.11 or other appropriate literature.
- Discuss the work project/activity with participants.
- d. Observe the work project/activity.
- A combination of the above.

Block 9: Identify appropriate actions to reduce or eliminate the hazards identified in block 8. Abatement measures listed below are in the order of the preferred abatement method:

- Engineering Controls (the most desirable method of abatement). For example, ergonomically designed tools, equipment, and furniture.
- b. Substitution. For example, switching to high flash point, non-toxic solvents. Work Leader
- Administrative Controls. For example, limiting exposure by reducing the work schedule; establishing appropriate procedures and practices.
- d. PPE (least desirable method of abatement). For example, using hearing protection when working with or close to portable machines (chain saws, rock drills, and portable water pumps).
- e. A combination of the above.

Block 10: The JHA must be reviewed and approved by a line officer. Attach a copy of the JHA as justification for purchase orders when procuring PPE.

Blocks 11 and 12: Self-explanatory.

Emergency Evacuation Instructions (Reference FSH 6709.11)

Work supervisors and crew members are responsible for developing and discussing field emergency evacuation procedures (EEP) and alternatives in the event a person(s) becomes seriously ill or injured at the worksite.

Be prepared to provide the following information:

- a. Nature of the accident or injury (avoid using victim's name).
- Type of assistance needed, if any (ground, air, or water evacuation).
- Location of accident or injury, best access route into the worksite (road name/number), identifiable ground/air landmarks.
- d. Radio frequencies.
- e. Contact person.
- Local hazards to ground vehicles or aviation.
- g. Weather conditions (wind speed & direction, visibility, temperature).
- Topography.
- . Number of individuals to be transported.
- Estimated weight of individuals for air/water evacuation

The items listed above serve only as guidelines for the development of emergency evacuation procedures.

JHA and Emergency Evacuation Procedures Acknowledgment

We, the undersigned work leader and crew members, acknowledge participation in the development of this JHA (as applicable) and accompanying emergency evacuation procedures. We have thoroughly discussed and understand the provisions of each of these documents:

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FLORIDA TRAIL ASSOCIATION Volunteer Participant Waiver and Release for Minors

		has my	(our) permiss	sion to participate in
Nam	ne of Minor			
a trail maintenance project on	the Florida Trail near <mark>(enter projec</mark>	t location, dates,	and times).	
I/we understand and acknowle sprains, and serious injury or	edge that trail maintenance poses r death.	isks to my child,	including the r	risk of bruises, scrapes, cuts,
I/we also attest that my child is	s physically fit to participate in trail	maintenance.		
and I/we do hereby certify tha other parent/guardian, cannot my child. I/we do hereby cons and hospital care are consider or under the supervision of the	nor is my son / daughter (circle one it to the best of my/our knowledge a be reached in an emergency, I her ent to whatever x-ray, examination, red necessary in the best judgment e medical staff of the hospital or fac ed will assume full responsibility fo	nd belief said mi eby give permiss anesthetic, med of the attending illity furnishing me	nor is in good sion to the stat lical, surgical of physician, sur edical or denta	health. In the event that I, or ff to secure proper treatment for or dental diagnosis or treatment rgeon or dentist and performed by al services. It is further
	gency Medical Release Form for th conditions, which should be made l			ncludes all allergies, medicine
release and forever discharge employees, agents and volunt acting officially or otherwise, fi minor's participation and/or m	(s) of the minor(s), do hereby, for mand hold harmless Florida Trail As eers of the organization, including from any and all claims, demands, as participation in the above noted eal agency volunteer programs do n	sociation, US Fo the owners and le actions or causes vent.	rest Service a easers of prer of action which	and all officers, directors, nises used to conduct the event ch in any way arise from the
	al agency volunteer programs do n infer on the volunteer the status of			ept as otherwise provided by law;
terms and acknowledgment	refully read this document and us above, and agree to permit my			
1Sign	ature	Print N	lame	Date
2. Sign	ature	Print N	lame	Date
Address	City	State	Zip	Phone (with area code)
Alternate Adult:				
Sign	ature	Print N	lame	Date
Address	City	State	Zip	Phone (with area code)