A logo with a tractor in a circle

Description automatically generated

A black background with a black square

Description automatically generated with medium confidence**Templates for Farmers:**

**Training Competencies**

From Page 2 onwards, this document provides a template to enable you to create a training competency record, specific to each piece of equipment in your company. Following these instructions will mean that your company is one step closer to becoming compliant with your OH&S responsibilities.

It is important to note that simply having this record is not enough to discharge your employer duties.

**Instructions for Use:**

1. Save this word document, and double click the header to insert your company name and remove the highlight.
2. Read through the listed skills and add/remove/change any options for the wording as required. Delete the highlighted reminder when you’re happy with the list.
3. Fill in the table at the bottom with the version number, date, your name and a digital signature (or you can print the document off, sign it and scan it back in for your records).
4. Print/Save a new copy of this file, to take your employees through the list of skills, and assign a Yes/No/NA answer.

**What to do next:**

1. Use this training document to induct new employees, and also to provide training for existing employees.
2. This is also worthwhile discussing during a toolbox meeting. A record of who is in attendance should be kept.
3. Take on and address any feedback or concerns that your employees may have. Adjust as necessary.
4. Once the training is completed, the Assessor and the Employees should all sign and date the form.
5. Place a copy of this training record in every participating Employee’s employment file.

To protect our workers, our animals and our equipment, we need to ensure that if you do a task that you are competent to do it, or you are under the supervision of someone who is competent and can train you. Once you have been assessed as competent we expect you to follow the training provided at all times. If you are asked to do a task for which you are not competent then let the person who has requested it know, so that supervision or training can be arranged.

|  |  |
| --- | --- |
| Auger/Elevator Operation |  |
| Skills Required | Yes/No/NA |
| Can explain hazards related to the transport and use of an auger/elevator |  |
| Can explain and demonstrate operation of Auger/Elevator |  |
| Transports auger empty and locked in the lowered or “full down” position |  |
| Does not transport the auger at speeds in excess of 20 MPH. |  |
| Plans travel route to avoid overhead power lines, low trees, and other potential hazards |  |
| Never allow persons to ride on the auger when it is being transported. |  |
| Knows when releasing from or attaching to a vehicle to test the intake end for downward weight. |  |
| Demonstrates when placing auger that it’s on a level surface, attached to a vehicle, and wheels are free to move when raising or lowering. Keeps the travel distance to a minimum when placing a raised auger. |  |
| During placement, make sure the entire area above the auger and in the line of travel is clear of obstructions and overhead power lines. |  |
| Moves the auger slowly into the working position with the towing vehicle, not by hand. |  |
| Anchors auger at the intake end and/or supported at the discharge end. Chocks the wheels on the auger and the power source on both sides. |  |
| Checks all guards on auger and PTO are in place and functioning correctly. |  |
| Establishes a work zone keeping all pedestrians away before starting auger. |  |
| Ensures auger is empty before attempting to move it again. |  |
|  |  |
| ADD or AMEND as necessary |  |
|  |  |
|  |  |

**The following person(s) have completed the training and been assessed as Competent on (date) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Assessed by (print name and signature) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

|  |  |
| --- | --- |
| **Employee Name** | **Employee Signature** |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |

**NOTE:**

Don’t forget to retain a copy of this competency training document on each individual’s employment file.

|  |  |  |  |
| --- | --- | --- | --- |
| **Version Number** | **Date Approved** | **Document Author** | **Author Signature** |
| 1.0 |  |  |  |
|  |  |  |  |