

Isle of Man Government

Safety Document for Contractors

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Introduction

This document forms part of the Health, Safety and Welfare Team guidance for the Appointment and Management of Contractors for Government works.

The purpose of this document is to guide government employee appointing the contractor to gather, agree and discuss health, safety and welfare arrangements as part of the works.

This document should be used as a guide and completed during a pre-start meeting which will take place prior to the works with time for any actions to be completed as necessary.

Both the Government Officer and Contractor will sign the receipt form to confirm their commitment and understanding as to the arrangements agreed.

Pre-Start Health & Safety Meeting

Health and Safety Meeting

This can be a virtual meeting, depending on the level of risk

Date of Pre-start Health and Safety Meeting: ____/____/20__

Location of Meeting:

Contractor Name:

Present:

(Representation should include, but not limited to Government Personnel, Contractor Personnel, Site Works Manager, Sub-contractor personnel)

Name	Company	Job Title/Project Function

Contact Details

Isle of Man Government Department

The proposed works are to be carried out for the Isle of Man Government Department:	
The Government Employee Responsible for this works is: Name:	
Telephone:	E-mail Address:
The Deputy and day to day management of the work is: Name:	
Telephone:	E-mail Address:

Contractor

Company Name:		
Trading Address:		
Contact Telephone Number:		
Name of Company Representative: Job Title:		
Telephone:	E-mail Address:	
Name of Deputy and Day to Day Management of Work is: Telephone:		
		E-mail Address:
Name of Health and Safety Advisor: Telephone:		
		E-mail Address:
Are you a member of The Manx Accredited Construction Contractors Scheme (MACCS)?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Comments:
Will you be using sub-contractors to support this work?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unsure	
If using sub-contractors are they a member of CIOM?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unsure	Yes Go to next section
How have you ensured Sub-Contractor competence? Including health and safety compliance documentation and insurance	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unsure	

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Scope of Works

Location of Works:
Nature of Site:
Normal Operational Hours of Site:
Special risks with site:

Insurance

Contractors must hold the correct level of insurance.

Q001	Does the certificate of insurance <ul style="list-style-type: none"> cover this work type? Sub-contractors and their work? 	<input type="checkbox"/> Yes <input type="checkbox"/> No
Q002	Does the certificate of insurance of any sub-contractor cover their section of work?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unsure
Q003	Are you a member of the CIOM Scheme?	<input type="checkbox"/> Yes – <i>go to question 007</i> <input type="checkbox"/> No – <i>please complete insurance details below</i>

Here you can enter any insurance details or collect a copy of the certificate. If sub contractors are in use, a copy of their insurance should also be collected.

Certificate of Employers' Liability Insurance	
Name of Policy Holder:	
Name of Insurance Provider:	
Policy Number:	
Date of expiry of insurance policy: Will this lapse during the works?	<input type="checkbox"/> Yes - ensure than an updated certificate is submitted prior to commencement date <input type="checkbox"/> No
Level of Employers' Liability Insurance	£
Any relevant exclusions?	

Certificate of Public Liability Insurance	
Name of Policy Holder:	
Name of Insurance Provider:	
Policy Number:	
Date of expiry of insurance policy: Will this lapse during the works?	<input type="checkbox"/> Yes - ensure than an updated certificate is submitted prior to commencement date <input type="checkbox"/> No
Level of Public Liability Insurance	£
Any relevant exclusions?	

Health and Safety Information

Q004	Are you a member of the CIOM Scheme? <i>(Select no if using Sub-contractor that are not a member)</i>	<input type="checkbox"/> Yes – go to question 007 <input type="checkbox"/> No – please complete insurance details below for yourself and any subcontractors
Q005	Do you have a health and safety policy statement which has been reviewed within the last year?	<input type="checkbox"/> Yes – please provide a link to this document or e-mail this document to: <input type="checkbox"/> No
Q006	Has your company achieved any Health, Safety or Environmental Accreditations?	<input type="checkbox"/> Yes – please provide a link to this document or e-mail this document to: <input type="checkbox"/> No
Q 007 CIOM	How do you ensure that any sub-contractors are competent?	<i>Answer:</i> <input type="checkbox"/> N/A
Q008	Do you carry out risk assessments for your work?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Q009	How do you communicate the detail of your risk assessments to your operatives/workforce?	<i>Answer:</i> <input type="checkbox"/> N/A
Q010	What Health and Safety Training do your staff receive?	<i>Answer:</i> <input type="checkbox"/> N/A
Q011	Can you provide evidence of training?	<input type="checkbox"/> Yes – please provide evident by e-mail to:

		<input type="checkbox"/> No <input type="checkbox"/> N/A
Q012	Has your company had any accidents/incidents within the last 3 years which are reportable under RIDDOR (Reporting of Injuries, Diseases and Dangerous Occurrences Regulations)?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Q013	Have your risk assessments been reviewed as a result of the above accidents/incidents?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unsure
Q014	Have you been served with any notices by the enforcing authorities for health and safety matters?	<input type="checkbox"/> Yes – <i>please provide details</i> <input type="checkbox"/> No <input type="checkbox"/> Unsure

Asbestos

Asbestos can be found in any industrial or residential building built or refurbished before the year 2000. It is in many of the common materials used in the building trade that you may come across during your work.

For example; sprayed coatings on ceilings, walls, beams and columns, loose fill insulation, lagging on boilers and pipes, vinyl floor tiles, asbestos cement roof, gutters and downpipes.

Q015 CIOM TOO	Have you seen the Asbestos register for site?	<input type="checkbox"/> Yes – <i>go to question 017</i> <input type="checkbox"/> No – <i>please speak with Estates</i>
Q016 CIOM TOO	Is there any evidence of asbestos in the working area?	<input type="checkbox"/> Yes – <i>please ensure that H, S & W Team are advised.</i> <input type="checkbox"/> No

Confined Spaces

A confined space is a place which is substantially enclosed (though not always entirely), and where serious injury can occur from hazardous substances or conditions within the space or nearby (e.g. lack of oxygen).

The HSE provides the following examples of confined space work. This is not an exhausted list and other instances do apply.

- (a) ducts, culverts, tunnels, boreholes, bored piles, manholes, shafts, excavations and trenches, sumps, inspection and under-machine pits, cofferdams;
- (b) freight containers, ballast tanks, ships' engine rooms and cargo holds;
- (c) buildings, building voids;
- (d) some enclosed rooms (particularly plant rooms) and compartments within them;
- (e) enclosures for the purpose of asbestos removal;
- (f) areas used for storage of materials that are likely to oxidise (such as store rooms for steel chains or wood pellet hopper tanks);
- (g) unventilated or inadequately ventilated rooms and silos;
- (h) structures that become confined spaces during fabrication or manufacture; and
- (i) interiors of machines, plant or vehicles.

Q017 CIOM TOO	Does the work involve any work in a confined space?	<input type="checkbox"/> Yes – <i>a permit to work system must be followed.</i> <input type="checkbox"/> No – go to question 020
Q018 CIOM TOO	Have all engineers been trained to work in confined spaces?	<input type="checkbox"/> Yes – <i>please provide evidence</i> <input type="checkbox"/> No
Q019 CIOM TOO	A specific risk assessment needs to be completed to display controls. Has this risk assessment been completed?	<input type="checkbox"/> Yes – <i>a copy of this must be submitted</i> <input type="checkbox"/> No – this must be completed before works commence

Control of Substances Hazardous to Health

Many materials or substances used or created at work could harm your health. These substances could be dusts, gases or fumes that you breathe in, or liquids, gels or powders that come into contact with your eyes or skin. There could also be harmful micro-organisms present that can cause infection, an allergic reaction or are toxic.

Harmful substances can be present in anything from paints and cleaners to flour dust, solder fume, blood or waste. Ill health caused by these substances used at work is preventable. Many substances can harm health but, used properly, they almost never do.

You must ensure Contractors have advised what materials they are using and that they have conducted their necessary checks and supplied that information so it can be filtered to employees, those on site, public, service users etc. The relevant information required is not limited to the items below:

- finding out what the health hazards are
- deciding how to prevent harm to health (risk assessment)
- providing control measures to reduce harm to health
- making sure they are used
- keeping all control measures in good working order
- providing information, instruction and training for workers and others
- providing monitoring and health surveillance in appropriate cases
- planning for emergencies
- Storage and disposal of materials

Q020 CIOM TOO	Have the contractors provided safety data sheets (SDS) for the materials they are using and have these been assessed and the assessment provided	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unsure
Q021 CIOM TOO	Are adequate storage facilities on site for the storing of hazardous substances	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unsure

Q022 CIOM TOO	Is there any additional fire precautions and are they being met	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unsure
Additional Comments		

Dust and Fume

Many work activities can create dust and fume which have the potential to cause immediate and long term debilitating conditions.

It is therefore necessary to identified and control any such works so far as is reasonably practicable.

Q020 CIOM TOO	Will the work create any dust/fume emissions?	<input type="checkbox"/> Yes <input type="checkbox"/> No – go to question 022 <input type="checkbox"/> Unsure
Q021 CIOM TOO	How will dust/fume be controlled?	<i>Comment:</i> <input type="checkbox"/> Unsure

Noise

Many work activities and tools will involve an element of noise. For example; demolition, brick work repairs, hammering and drills.

Q022 CIOM TOO	Will elements of the work be noisy?	<input type="checkbox"/> Yes <input type="checkbox"/> No – go to question 024 <input type="checkbox"/> Unsure
Q023 CIOM TOO	How will noise be controlled?	<i>Comment:</i> <input type="checkbox"/> Unsure

Electrical Safety

All portable electrical appliances used on site such as tools, equipment and radios must be safe for use. Equipment should show that they have been tested for electrical safety through appropriate appliance testing.

Contractors are to ensure that no damaged is caused to any electrical plan or appliance caused by over running, short circuiting, excessive pressure or self heating.

Suitable precautions need to be planned for and implemented when working near electricity.

This includes

- overhead power lines,
- working on electrical equipment
- machinery or installations
- excavation and underground services
- electricity in potentially explosive atmospheres
- maintaining electrical equipment
- work using electrically powered equipment

Q024 CIOM TOO	Will any electric devices be plugged in on site? This includes the charging of batteries for drills	<input type="checkbox"/> Yes <input type="checkbox"/> No – go to question 026
Q025 CIOM TOO	How will you ensure that they are electrically safe and intrinsically safe?	<i>Comment:</i> <input type="checkbox"/> Unsure
Q026 CIOM TOO	Does the work involve working on live electrics?	<input type="checkbox"/> Yes <input type="checkbox"/> No – go to question 028 <input type="checkbox"/> Unsure
Q027 CIOM TOO	How will this be controlled?	<i>Comment:</i> <input type="checkbox"/> Unsure

Fire Safety

Working with flammable liquids, dusts, gases and solids is hazardous because of the risk of fire and explosion.

Fire safety arrangements for this work will be agreed in advance.

Q028 CIOM TOO	Have all fire risks been identified as part of the works?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Q029 CIOM TOO	Have all necessary fire fighting equipment been identified and be available for the duration?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
Q030 CIOM TOO	Have staff working been made aware and trained to support emergency situations?	<input type="checkbox"/> Yes <input type="checkbox"/> No

Q031 CIOM TOO	Where hot works are involved, is the Hot Work Permit process understood by all?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
Q032 CIOM TOO	Is there a need to isolate the fire alarm system – part or in full?	<input type="checkbox"/> Yes – <i>please give details</i> <input type="checkbox"/> No <input type="checkbox"/> N/A
Q033 CIOM TOO	In an event of emergency evacuation, the following procedures have been agreed. In an event of emergency first aid, the following procedures have been agreed.	<i>Confirmed Plan:</i> Evacuation: Emergency Aid:

Flammable liquids and gases

Suitable controls need to be in place for flammable liquids and gases brought onto the site.

Q034 CIOM TOO	Will any flammable liquids and gases be used during the works?	<input type="checkbox"/> Yes <input type="checkbox"/> No – go to question 037
Q035 CIOM TOO	Will any flammable liquids or gases be stored on site? If so, how	<input type="checkbox"/> Yes Comment: <input type="checkbox"/> No <input type="checkbox"/> N/A
Q036 CIOM TOO	If stored or used on site, will material data sheets be adhered to for safe use, handling and storage?	<input type="checkbox"/> Yes <input type="checkbox"/> N/A <input type="checkbox"/> Unsure

Gas Safety

Engineers working on gas must be competent and registered as so on the Gas Safe Register.

Q037 CIOM TOO	Will the work involve working on gas systems?	<input type="checkbox"/> Yes <input type="checkbox"/> No – go to question 039 <input type="checkbox"/> Unsure
Q038 CIOM TOO	If so, please provide evidence of registration with Gas Safe Register	Email evidence to:

Hot Works

Hot work is classified as high risk. Hot work is a generic term for the application of heat which takes place as part of a maintenance or repair job, and could be carried out by contractors or by in-house maintenance staff. Typically, hot work is most commonly associated with roofing work,

though it could also be carried out by plumbers, decorators, maintenance engineers or other contractors.

A permit is required when the following tasks are carried out on site:

- fire-producing or spark-producing operations that may increase the risk of fire or explosion.
- heating
- thermal or oxygen cutting
- Welding

Q039 CIOM TOO	Will hot works be carried out as part of the works?	<input type="checkbox"/> Yes <input type="checkbox"/> No – go to question 041 <input type="checkbox"/> Unsure
Q040 CIOM TOO	What arrangements have been agreed for this type of work? Re: <ul style="list-style-type: none"> • issuing of hot work permit • fire controls and watch • signing off hot work permit 	Agreed:

Lighting

Lighting at work is very important to the health and safety of everyone using the workplace. The quicker and easier it is to see a hazard, the more easily it is avoided.

Q041 CIOM TOO	Will lighting levels need to be adjusted to support the work?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unsure
Q042 CIOM TOO	Is temporary artificial lighting required? If so, how will this be managed?	<input type="checkbox"/> Yes <input type="checkbox"/> Unsure <input type="checkbox"/> N/A
Q043 To Host	If the lighting system is on a PIR sensor or environmental control, can this be overridden to support working hours	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unsure

Lone working

Certain maintenance activities can be supported by one contractor working on an occupied site. Certain activities will require a second person. For example, working at height and manual handling.

Where lone working is to be supported, suitable arrangements must be in place to support the employee.

Q044 CIOM TOO	Will lone working be part of the works?	<input type="checkbox"/> Yes <input type="checkbox"/> No – go to question 046 <input type="checkbox"/> Unsure
Q045	How will lone working be controlled?	<input type="checkbox"/> Yes <input type="checkbox"/> Unsure

CIOM TOO		<input type="checkbox"/> N/A
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Machinery, Plant and Equipment

Some work will require the use of machinery, plant and equipment. All must be considered suitable and safe to support the work and operated in a way which does not pose a risk to others or other activities.

Q046 CIOM TOO	Will machinery, plant and equipment be brought onto the site to support the work?	<input type="checkbox"/> Yes <input type="checkbox"/> No – go to question 048 <input type="checkbox"/> Unsure
Q047 CIOM TOO	How will safety be maintained?	Comments:
		Permit Number
General Permit to Work		

Property		Job Number	
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Actions	Details						
1. Emergency Response	In an emergency- Stop all work Secure work area (if safe to do so) Raise Alarm Proceed to Assembly Point ASAP				Assembly Point		
					Fire Alarm Pt		
					Eyewash Point		
					Emergency phone number		
2. Permit Control	Issued by		Contact No		Permit Holder		Contact No
3. Location of Work	Site						
4. Asset ID	Specific Area						
5 Description of Work							
6 Special Conditions	Will the work involve Hot Work or Entering a Confined Space?				If 'Yes' a Hot Work and/or a Confined Space Permit will also be required		
	YES <input type="checkbox"/> NO <input type="checkbox"/>						

7 Plant, Equipment and Tools Required		
8 Hired in Tools/Equipment	Condition / Compliance	Inspected/Test Cert Yes <input type="checkbox"/> No <input type="checkbox"/>
9 Hazards- Tick each that apply Have you completed a HW/CF Permit?	Hot Work / Blasting	Substances
	Welding <input type="checkbox"/>	Asbestos <input type="checkbox"/>
	Flame Cutting <input type="checkbox"/>	Toxic Gas/Liquid <input type="checkbox"/>
	Grinding <input type="checkbox"/>	Hydrocarbons <input type="checkbox"/>
	Drilling <input type="checkbox"/>	Radiation <input type="checkbox"/>
	X Ray / Radiography <input type="checkbox"/>	Hazardous Waste <input type="checkbox"/>
	Grit / Sand Blasting <input type="checkbox"/>	Other
	High Pressure Jetting <input type="checkbox"/>	Manual Handling <input type="checkbox"/>
		Slips/Trips <input type="checkbox"/>
		Electrical Tools <input type="checkbox"/>
		Battery <input type="checkbox"/>
	Energy Source	Environment
	Pressure Equipment/Testing <input type="checkbox"/>	Inclement Weather <input type="checkbox"/>
	Electricity <input type="checkbox"/>	Poor Lighting <input type="checkbox"/>
	Rotating Equipment <input type="checkbox"/>	Confined Space <input type="checkbox"/>
	Work at Height <input type="checkbox"/>	Unstable Surf. <input type="checkbox"/>
	Suspended Loads <input type="checkbox"/>	Work over water <input type="checkbox"/>
	Lifting (Crane or HiAB) <input type="checkbox"/>	Noise <input type="checkbox"/>
	Moving Vehicles <input type="checkbox"/>	Dust <input type="checkbox"/>
Unguarded Equipment <input type="checkbox"/>	Hot/Cold Surf. <input type="checkbox"/>	
10 Ground Works	Has the Dial-Before-You-Dig service been contacted?	Yes <input type="checkbox"/> No <input type="checkbox"/>
	Are underground services' drawings available?	Yes <input type="checkbox"/> No <input type="checkbox"/>
	Has the area been scanned and results reviewed?	Yes <input type="checkbox"/> No <input type="checkbox"/>
	RAMS issued and reviewed?	Yes <input type="checkbox"/> No <input type="checkbox"/>
	On site pre-work meeting between PEH and contractor completed?	Yes <input type="checkbox"/> No <input type="checkbox"/>
10a Comments:		

If any of the questions at No 10 has been answered NO a Permit should not be issued

11 Other	Limitation Of Access			
12 Controls Required	Lock off/Tag Out	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Isolation Tag/Key Numbers
	Fire Extinguisher	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Type/Location
	Demarcation	Yes <input type="checkbox"/>	No <input type="checkbox"/>	
	Warning Notices	Yes <input type="checkbox"/>	No <input type="checkbox"/>	
	Segregation	Yes <input type="checkbox"/>	No <input type="checkbox"/>	
	Other (Specify)	<input type="checkbox"/>		
13 PPE Requirements	Head Protection	Yes <input type="checkbox"/>	No <input type="checkbox"/>	<u>State Spec/Type</u>
	Hearing Protection	Yes <input type="checkbox"/>	No <input type="checkbox"/>	
	Eye Protection	Yes <input type="checkbox"/>	No <input type="checkbox"/>	
	Hand Protection	Yes <input type="checkbox"/>	No <input type="checkbox"/>	
	Safety Footwear	Yes <input type="checkbox"/>	No <input type="checkbox"/>	
	Face Mask/Respirator	Yes <input type="checkbox"/>	No <input type="checkbox"/>	
	High Visibility Clothing	Yes <input type="checkbox"/>	No <input type="checkbox"/>	
	Personal Fall Protection	Yes <input type="checkbox"/>	No <input type="checkbox"/>	
	BA/Fixed/Escape	Yes <input type="checkbox"/>	No <input type="checkbox"/>	

14 Permit Acceptance	Name: ----- Employee/Contractor Signed _____ _____ Date: _____
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15 Permit Issuer/ Authorisation	<p>I have examined the area and precautions in place and permission is given for work to start, subject to the conditions stated on this permit.</p> <p>Name: _____ Position:.....</p> <p>Signed: _____ Date: _____</p>			
16 Management Authorisation	<p>I have been made fully aware of the nature of the work to be undertaken stated within the controls of this permit to work</p> <p>Name:----- Authoring Manager</p> <p>Signed; ----- Date:----- -----</p>			
Date	Sign On	Sign Off	Time	Permit Controls in place-Y/N

Permit to work

Before any works can start within the workplace; relevant permits must be issued by the Authorised Person. Below is an example of the types of permits that may be used.

Permit	Issued (Yes/No)
Decon Permit to Work	
Electrical Permit to Work	
Hot work permit	
Permit to work / Permit to Access	
Steam (BG01) Permit to Work	
Ventilation Permit to Work	
Water Permit to Work	

Permit to Access

A permit to access can only be completed when all relevant documentations, due diligence has been completed and those on site have been made aware of the upcoming works. This permit must be issued to the contractors as their instruction that they are clear to enter the premises. This document must be provided for works within all government departments.

Permit to Access

The purpose of this document is for compliance with the security and safety standards set for this particular site.

Access cannot be authorised without prior arrangement for access being made.

To be completed by person controlling the contractor/works (IOM Government Employee)

Name		
Department		
Visiting Contractor	(Company Name)	
	(Representative)	
Works to be carried out:	Job Number:	
Date & Time for Visit		
IOM Government Authorising Access	Signature	Print Name

Method statement/risk assessment attached to this document? <i>If no, one must be produced and shared with those authorising the works</i>	Yes/No
Does the work involve any isolation of fire detection or suppression system? <i>If yes, this must be considered within the attached risk assessment.</i>	Yes/No
Does work involve any isolation of the security system? <i>If yes, this must be considered within the attached risk assessment</i>	Yes/No
Will the work restrict access to the area?	Yes/No
Will there be any hot works associated with this activity?	Yes/No
Is access required into any sensitive areas ie COMMS/Server/CCTV/Records? <i>If yes, data owner must also be aware of this work</i>	Yes/No
I can confirm that I do consider myself competent, with the correct level of skill, knowledge and experience to carry out this task	Yes/No
Does the work involve any of the following? <input type="checkbox"/> asbestos <input type="checkbox"/> confined space <input type="checkbox"/> dust & fume <input type="checkbox"/> heights <input type="checkbox"/> live electrics <input type="checkbox"/> flammable liquids/gas <input type="checkbox"/> hot works <input type="checkbox"/> pressure systems <input type="checkbox"/> radiation <input type="checkbox"/> heavy plant / machinery <i>If yes, please engage with the Health, Safety and Welfare team if unsure on sufficient health and safety checks which are required to control the contractor.</i>	Yes/No

To be completed by Engineer upon arrival

Name		
Signature		
Awareness and acceptance of site security and safety arrangements	Yes/No	
Comments		
Security Card Issued	Card number:	
Physical Key Details		

<i>To be completed by host (can be the same as the authorised person)</i>		
Name		
Date & Time Works Completed – permit no longer required		
Awareness and acceptance of site security and safety arrangements	Yes/No	
Comments		

Manual Handling

Manual handling relates to the moving of items either by lifting, lowering, carrying, pushing or pulling.

Q048 CIOM TOO	Will the work involve an element of manual handling which would require detailed planning?	<input type="checkbox"/> Yes - please provide details: <input type="checkbox"/> No <input type="checkbox"/> Unsure
Q049 CIOM TOO	Will this require the use of the site lift? If so, we will need to understand weights to ensure the working load is not exceeded.	<input type="checkbox"/> Yes - please provide details: <input type="checkbox"/> No <input type="checkbox"/> Unsure

Personal Protective Equipment

All Personal Protective Equipment must be identified through risk assessment and provided by the employer.

If any site specific equipment is required due to the nature of the site, this will be detailed below:

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Pressure systems

Pressure systems can range from steam-generating commercial coffee machines to large boilers. When using pressure systems every employer or self-employed person has a duty to provide a safe workplace and safe work equipment.

Q050 CIOM TOO	Will work be carried out on any pressure system?	<input type="checkbox"/> Yes - please provide details: <input type="checkbox"/> No <input type="checkbox"/> Unsure
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Radiation

Radiation types are used in a diverse range of industrial, medical, research and communications applications.

Although these applications bring real benefits to people, some can create potential harmful exposure risks that must be effectively controlled.

Workers may be exposed to a variety of types of radiation by virtue of where they work and what activities they undertake as part of their job, for example:

- Gamma radiation - naturally occurring, especially at high altitude.
- X-rays - usually generated in the workplace and used, for example, in medical equipment, security-scanning equipment, metallurgical testing, underground location equipment.
- Ultraviolet (UV) - used in, or generated by, ink curing, arc welding, sun lamps, and naturally occurring in sunlight.
- Lasers - most commonly visible light and infrared (IR) used in industrial, research and medical applications.
- Infrared (IR) - used for radiant heating, curing and fusing.
- Radio and microwaves - used in radar, microwave ovens, mobile phones, wi-fi (wireless) networks, TV and radio, and repeater towers.
- Electromagnetic fields - for example from medical diathermy and electromagnetic resonance imaging (EMI) scanners or industrial radio frequency welding equipment or dielectric equipment.

Q051 CIOM TOO	Is radiation a risk for this work?	<input type="checkbox"/> Yes - please provide details: <input type="checkbox"/> No <input type="checkbox"/> Unsure
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Site Security

Strict security and safety procedures must be followed for the nature of the site. This will include following the signing in and out procedure, attending a site induction and adhering to any site permit to access rules.

The agreed site access arrangements are as follows for this site:

Q052	How will staff be inducted onto the site?	Details:
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Slips, trips and falls

Contractors are expected to maintain a safe environment for colleagues, members of the public and occupiers of the area.

All measures must be taken to reduce the risk of slips, trips and falls.

Temperature

The location you will be working will be controlled by a suitable temperature for that environment.

Certain maintenance activities will require settings to be adjusted. For example, manual handling may require a lower temperature. This may be possible if working outside of core hours.

Q053 CIOM TOO	Will the temperature of the current working environment create difficulties for the work?	<input type="checkbox"/> Yes - please provide details: <input type="checkbox"/> No <input type="checkbox"/> Unsure
Q054 Host	Is the temperature on a timer? Does this need adjusting to support outside of working hours?	<input type="checkbox"/> Yes - please provide details: <input type="checkbox"/> No <input type="checkbox"/> Unsure

Vehicles

The following arrangements have been made for vehicles on site:

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Work at heights

Considering the risks associated with work at height and putting in place sensible and proportionate measures to manage them is an important part of working safely.

Q055 CIOM TOO	Will work include working at heights?	<input type="checkbox"/> Yes - please provide details: <input type="checkbox"/> No <input type="checkbox"/> Unsure
Q056 CIOM TOO	Will working at heights be supported by a ladder?	<input type="checkbox"/> Yes - please provide control details: <input type="checkbox"/> No <input type="checkbox"/> Unsure
Q057 CIOM TOO	Will working at heights be supported by any type of scaffold?	<input type="checkbox"/> Yes - please provide control details: <input type="checkbox"/> No <input type="checkbox"/> Unsure

Groundworks

Q058 CIOM TOO	Will work include breaking ground?	<input type="checkbox"/> Yes - please provide details: <input type="checkbox"/> No <input type="checkbox"/> Unsure
Q058 CIOM TOO	Have the required utilities ground reports been obtained and underground services been located?	<input type="checkbox"/> Yes - please provide control details: <input type="checkbox"/> No

		<input type="checkbox"/> Unsure
Q059 CIOM TOO	Will a CAT scan be conducted?	<input type="checkbox"/> Yes - please provide control details: <input type="checkbox"/> No <input type="checkbox"/> Unsure
Q060 CIOM TOO	Required ground breaking permit received?	<input type="checkbox"/> Yes - please provide control details: <input type="checkbox"/> No <input type="checkbox"/> Unsure

Health and Safety Meeting Receipt

Once arrangements have been agreed, the below should be signed by those who are responsible for ensuring that arrangements are in place as discussed and agreed.

Name	Company	Job Title/Project Function	Date	Signature