



## Site Assessment Form

### Found 05/1 | Mobile Elevating Work Platform (MEWP)

(Underpinning knowledge – Training Spec.: Module 206.1, 206.2, 206.3)

<b>Name of Person Being Observed:</b>	
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<b>Site Address:</b>	<b>Equipment:</b>	<b>Activity:</b>

<b>Observed Tasks:</b>		<b>Date Observed On Site as Competent:</b>
1.	Ensure employee is of the age laid down in the organisation's policy to operate a MEWP	
2.	Confirm employee is fully aware of the H&S responsibilities of a MEWP operator	
3.	Confirm the ascent & descent has been adequately planned	
4.	Confirm MEWP has been checked by visual inspection prior to lift	
5.	Confirm check for overhead lines has been made	
6.	Has the vehicle been correctly positioned to provide safe access	
7.	Have all persons been kept out of the hazard zone whilst working at height	
8.	Correct deployment of jack legs or stabilisers for the circumstances	
9.	Correct use of relevant fall prevention / fall restraint equipment for the circumstances	
10.	Sequence of manoeuvre when ascending & descending and maintaining a proper lookout	
11.	No collision with other objects (e.g. column, buildings, other street furniture)	
12.	Booms and bucket kept out of area occupied by moving traffic	
13.	Access to controls & store materials adequately maintained	
14.	Knowledge of emergency action if the booms cannot be lowered normally	
15.	Consideration given to the safety of the public and/or other workers in the vicinity	
16.	Correct use of appropriate PPE	
17.	Correct storage & maintenance of PPE to avoid deterioration	

<b>Observation Comments (if none, write None):</b>

<b>Comments from Person Being Observed (if none, write None):</b>

<b>Has an action plan been produced identifying additional training needs/competency assessments?</b>	<b>Yes</b>	<b>No</b>
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<b>NVQ Assessor Name (if used to carry out site assessment above)</b>			
<b>Qualified Supervisor Name:</b>		<b>QS No:</b>	
<b>Signature:</b>		<b>Date:</b>	



## Qualifications & Training Evidence Form

### Found 05/1 | Mobile Elevating Work Platform (MEWP)

(Underpinning knowledge – Training Spec.: Module 206.1, 206.2, 206.3)

Qualifications and Training Evidence (*See note below):		Date Achieved:	Witnessed as seen original:
1.	Mobile Elevating Work Platform training:		

**Authorising Officers Comments** (if none, write None):

**AUTHORISING OFFICER:**

<b>Outcome: Assessed as:</b>	<b>Competent:</b>		<b>Not yet competent:</b>	
<b>Authorising Officer Name:</b>		<b>AO Number:</b>		
<b>Signature:</b>		<b>Date:</b>		

\*Note:

1. All Training must be in strict accordance with the Highway Electrical Training Specification and must be delivered by Highway Electrical Skills Academy (HESA) Approved Trainers other than the named accepted alternative provision. The Training Specification and details on the Requirements for Approved Trainers are available as downloads from the HERS web-site - <https://thehea.org.uk/hers-hesa/approved-trainers/>
2. Add details of additional education & training evidence relevant to the occupation & tasks carried out, if any
3. An occupationally competent and qualified NVQ assessor may be used by organisations employing less than 5 people to carry out this site assessment in addition to a QS