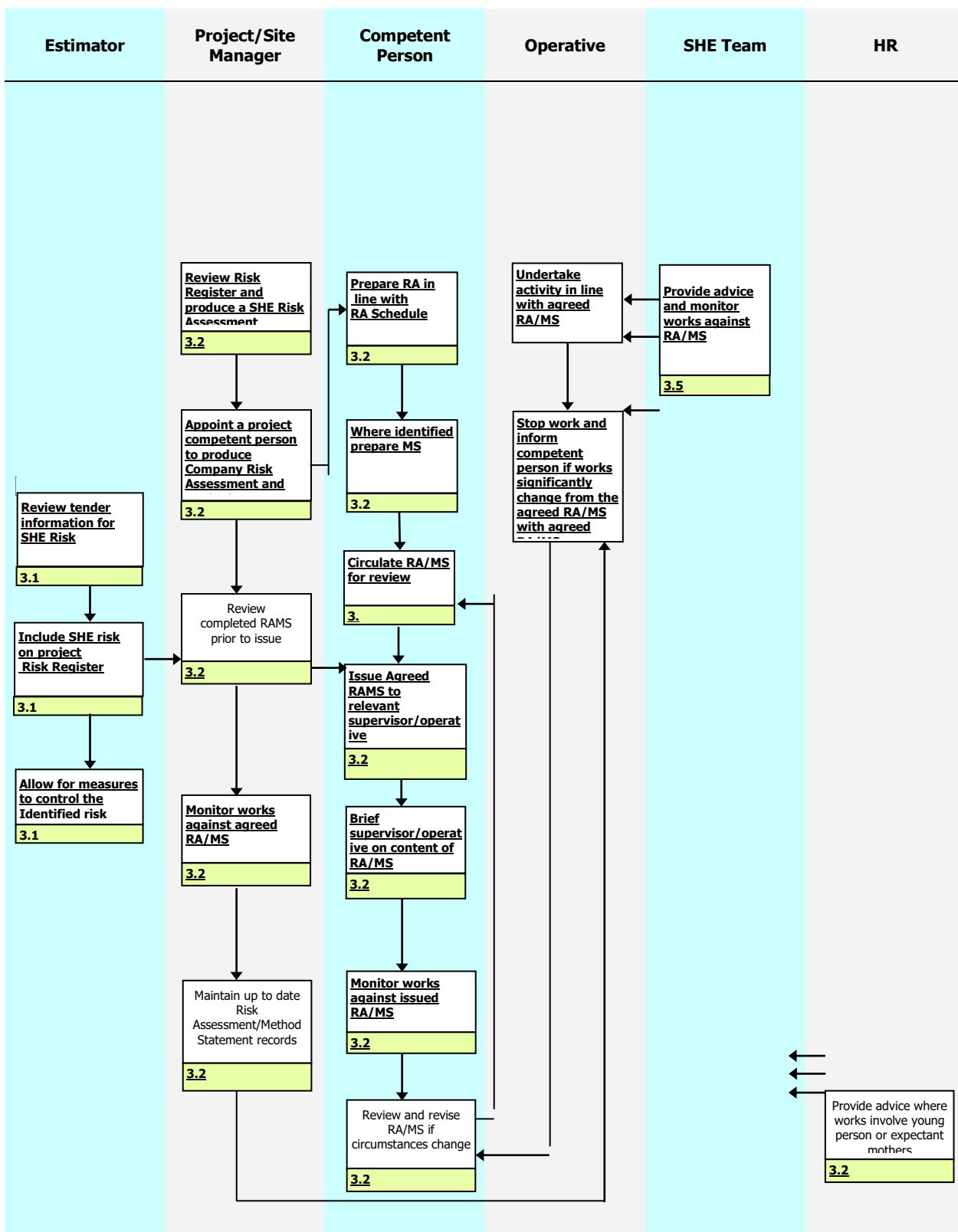


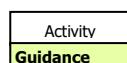
**2 SAFETY AND ACCIDENT PREVENTION MANAGEMENT /
ADMINISTRATION SYSTEM (SAMAS) 1****2.3 SAFETY, HEALTH AND ENVIRONMENT PROCEDURES 1**

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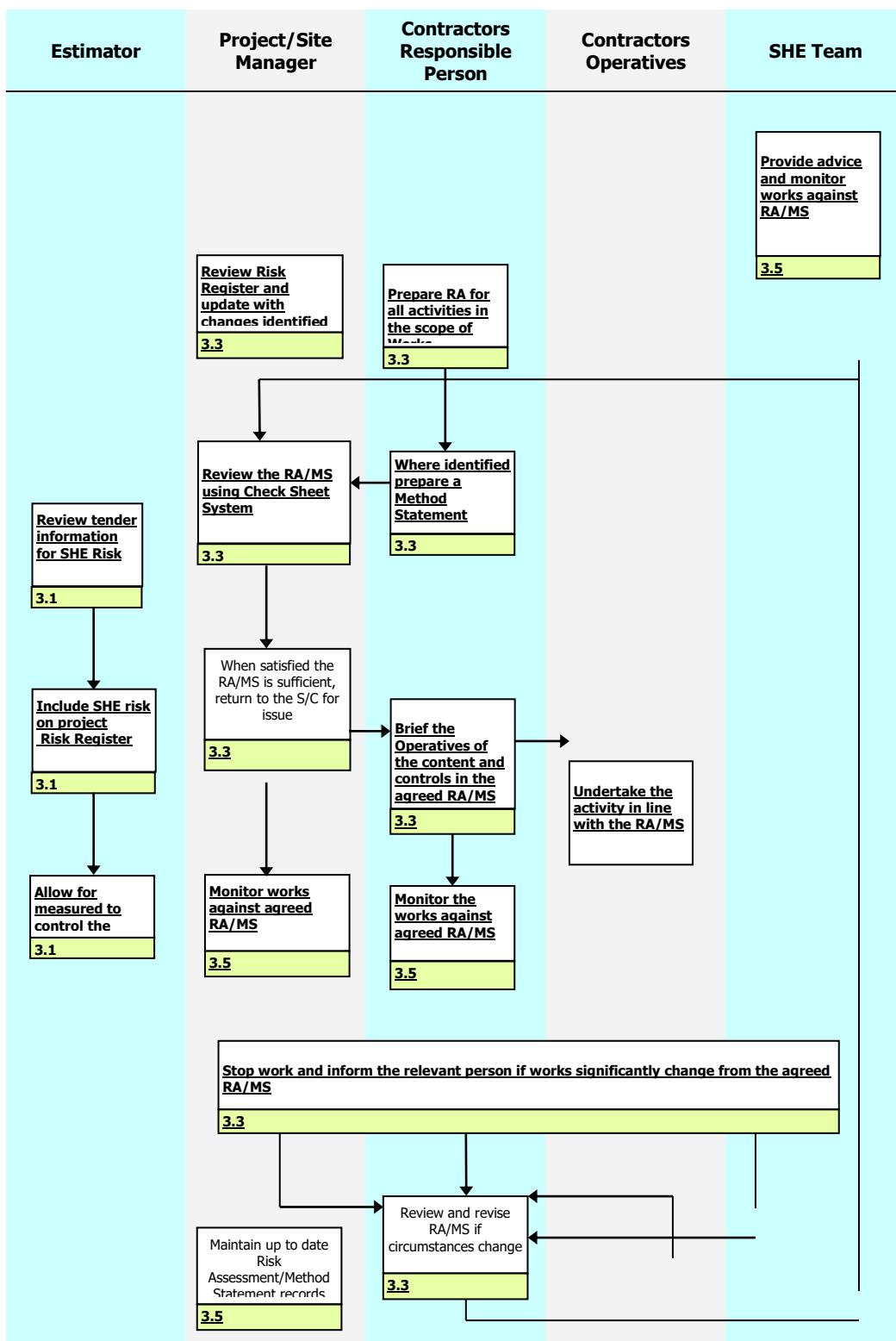
PROCESS MAP – COMPANY DIRECT WORK



Key



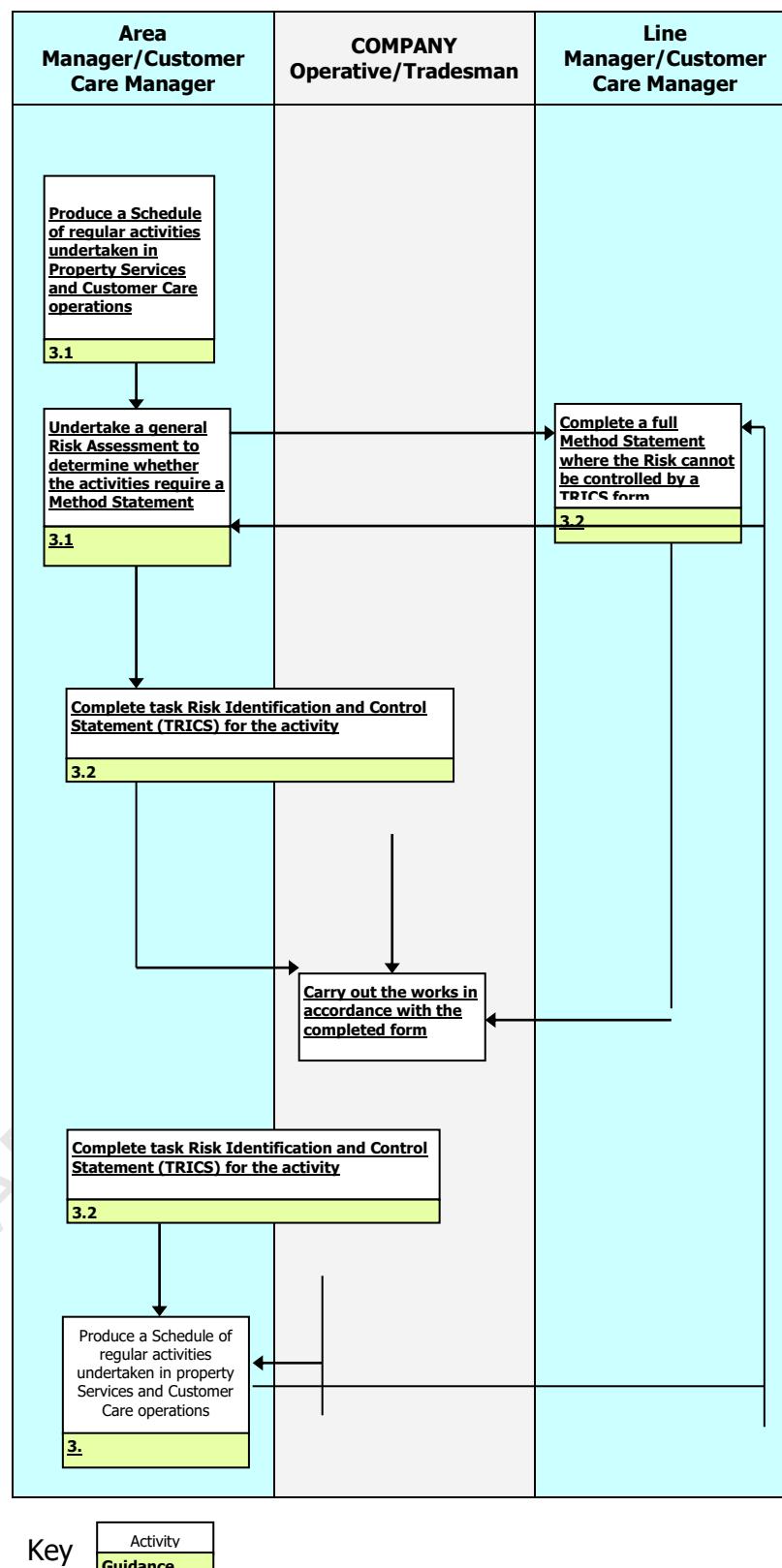
PROCESS MAP – SUBCONTRACT WORKS



Key

Activity
Guidance

PROCESS MAP – FACILITIES SERVICES AND CUSTOMER ACTIVITIES



Key

Activity
Guidance

PURPOSE

1 The purpose of this procedure is to assign responsibilities and provide a consistent approach to the planning, development and production of suitable and sufficient Risk Assessments and the control of Method Statements for all activities.

SCOPE

1 This procedure covers all **COMPANY Projects** and locations under the control of **COMPANY**. A **COMPANY** is defined as the organization with responsibility for management of safety at a construction site

REFERENCE DOCUMENTS

- 1 Qatar Regulatory Document (Construction) RD1.1.7
- 2 Risk Assessment Methodology SAMAS 2.4

REFERENCE FORMS

- 1 S,H&E Risk Assessment Form (SHE-FRM-1-01)
- 2 Job/Task Risk Assessment/Method Statement (SHE-FRM-1-02)
- 3 Tracking and Content Sheet (SHE-FRM-1-04)
- 4 Task Risk Identification and Control Statement (TRICS) (SHE-FRM-1-05)

2.3.1 Risk Identification and Management

2.3.1.1 Responsibilities

SHE DIRECTOR

- 1 Authorises and reviews this procedure.

PROJECT/SITE MANAGER

- 2 Ensures the procedure is established and used and that Risk Assessments are carried out and, where appropriate, Method Statements are produced.
- 3 Unless delegated to others, in writing, retain responsibility for monitoring of the works against the relevant control documents.

COMPETENT PERSON

- 4 Prepare Risk Assessments taking account of the task being undertaken and the specific layout and restrictions of the place the work is to be carried out and where identified produce a written Method Statement incorporating a safe system of work.

SUPERVISORS

- 5 Either supervises the work activities or the sub/work package contractor undertaking those work activities in line with relevant control documents required by this procedure. Provide support to the review process for the Risk Assessment and Method Statement, to ensure acceptability SHE-FRM-1-03.

SHE MANAGER/ADVISER

- 6 Provides advice and support in the application of this procedure and monitors effectiveness of the relevant control documents.
- 7 If the nature of the work is deemed 'safety critical', the SHE Manager/Adviser may provide appropriate support for the production of the control documents and the communication to all relevant Operatives.

OPERATIVE/CONTRACTOR EMPLOYEE

- 8 Carry out the work in accordance with the relevant control documents.

SUB/WORK PACKAGE CONTRACTOR

- 9 Prepare Risk Assessments taking account of the work being undertaken and the specific layout and restrictions of the place the works is to be carried out.

HUMAN RESOURCES

- 10 Provide assistance in cases of new or expectant mothers, young persons or children.

2.3.1.2 Definitions

CONTROL DOCUMENTS

- 1 Written documents used to manage the risk associated with the work activity including:
- (a) Risk Assessment
 - (b) Method Statement
 - (c) Permits
 - (d) Plan of Work
 - (e) Certification
 - (f) Licence
 - (g) Skill Card
 - (h) or any other supporting documentation

RISK ASSESSMENT

2 The process of hazard, aspect, impact, identification, assessment of the risk, and identification of the controls required to manage the risk to an acceptable level to ensure the health and safety of those affected by the activity and the protection of the environment from harm. In undertaking the Risk Assessment the Qatar Regulatory Document (Construction) principles of prevention must be considered, which are:

- (a) Eliminate
- (b) Control - In controlling the hazard the following should be considered in order:
 - (i) Substitution – use a less risky method/material
 - (ii) Guarding – place guards, barriers and /or signage to isolate or warn of the hazard
 - (iii) PPE – provide personal protection to individuals
 - (iv) Decontamination – clear/clean up after exposure

RISK ASSESSMENT GUIDES

- 3 Refer to SAMAS 2.4.

METHOD STATEMENT

4 A hazard control measure in the form of a written safe system of work describing the proposed working method and addressing the output from the Risk Assessment process, providing instruction and guidance for those individuals' carrying out the activities. The purpose of this document is to ensure the proper planning of an element of the works and to detail the overall methodology and associated controls SHE-FRM-1-03. The document must be issued/briefed to management/supervision.

5 For work carried out by COMPANY Facility Services or Customer Care activities, the Method Statement may be substituted with Task Risk Identification and Control Statement (TRICS) SHE-FRM-1-05.

6 Sub/Work Package Contractors are to be encouraged to follow the COMPANY structure as mentioned above. Suggestion to adopt COMPANY safe system will require an element of instruction/training. For guidance contact the SHE Team.

7 Alternatively Risk Assessment and Method Statements prepared by Sub/Work Package Contractors may be prepared as a single document, providing the content is equivalent to that of the RA/MS above.

TASK RISK IDENTIFICATION AND CONTROL STATEMENT (TRICS)

8 This document is specific to Property Services Work and Customer Care activities and eliminates the need to produce a detailed Method Statement in the format described above. It must only be used when the Supervisor has carried out a Risk Assessment which concludes that a Method statement is not required. The Job/Task RA/MS is completed by the operative / supervisor using form SHE-FRM-1-02.

COMPETENT PERSON

9 Is a person who has sufficient training, experience and knowledge to enable them to properly undertake the task in question or carry out the Risk Assessment.

TECHNICAL ADVISER

10 Dependant on the type of work the Method Statement is being prepared for, the Technical Adviser can be any combination of individuals (i.e. Designer, Materials Engineer, Temporary Works Co-ordinator, etc.)

11 The Technical Adviser provides, where required, support to the review process to ensure suitability of the content of the Risk Assessment/Method Statement. SHE-FRM-1-03.

YOUNG PERSON

12 Any person between the age of 16-18 years old.

CHILD

13 Any person under 16 years old.

2.3.1.3 Action Required To Implement This Procedure

GENERAL

1 At Tender stage the **Estimator** will review the Pre-Tender Safety Information provided and instigate the production of a Project Specific Risk Register, which will identify Risk including safety risks associated with the proposed works.

2 Details of the risks identified and any measures included on the risk register will be included in the enquiry documents produced for contractor's works.

3 Allowances should be made in the settled tender for arrangements to control these risks during the Construction Phase of the project.

4 At the start of the Construction Phase, the **Project/Site Manager** will review the risk register and project program and produce a schedule of activities which will be used as a basis for ensuring that all elements of the construction process are identified and considered for Risk Assessment.

5 Using the schedule the **Project/Site Manager** will ensure a suitable Risk Assessment is produced which will identify whether a Method Statement is required as part of the control measures.

6 For Facility Service or Customer Care works the Area Manager or Customer Care Manager will produce a schedule of activities undertaken on a regular basis by operatives working on this type of work. A Risk Assessment will be undertaken and where it is identified that the hazards can be controlled without the need of a full Method Statement he will indicate that the operation be subject to a Risk Identification and Control Statement (TRICS) and the procedure in 3.4 will be followed.

ACTIVITIES UNDERTAKEN BY COMPANY

7 Before carrying out any activity undertaken by direct **COMPANY** employees, the **Project/Area/Site Manager** for the workplace/operation/ design concerned shall first produce/review the Risks Assessment Schedule with the intention of identifying where hazard and risk could arise. This should include discussion with the people undertaking the work, if appropriate. It should be remembered that a risk could be seen as minimal but by further work processes could become significant. Such as painting outside to painting in a confined space.

8 Following this review a specific Risk Assessment using SHE-FRM-1-02 shall be undertaken by a **Competent Person** appointed by the **Project/Area/Site Manager**.

9 Where young persons or expectant mothers are involved in the activity, additional concerns may be required. Advice should be sought from the **HR Team**.

10 Where identified in the Risk Assessment the **Competent Person** in conjunction with any other relevant person will:

(a) prepare a Method Statement taking account of the following:

- (i) The controls identified in the Risk Assessment.
- (ii) All relevant Safety, Health, Environmental (SHE) matters.
- (iii) The headings, as a minimum, indicated in SHE-FRM-1-03 & 1-04.
- (iv) Circulate the Method Statement utilising the tracking and content sheet SHE-FRM-1-04.

(b) Take account of comments received from other parties and re-circulate Risk Assessment and Method Statement to those people to ensure issues raised have been dealt with adequately.

- (c) Following agreement of the suitability of the Risk Assessment and Method Statement by the Project/Site Manager, ensure it is issued to relevant management/supervision.
 - (d) Monitor performance against the Risk Assessment and Method Statement and identify and make any necessary changes The Risk Assessments produced shall be used, where appropriate, as the basis for COMPANY personnel checking the contents of sub or work package contractors' safety method statements.
 - (e) The Risk Assessment and Method Statement shall be briefed to ensure that the detail is communicated to all relevant Operatives and carry out a reality check to confirm understanding of key aspects.

ACTIVITIES UNDERTAKEN BY CONTRACTORS

11 The **Project/Site Manager** must ensure contractors have been procured via **COMPANY**
Contractor Assessment procedure.

12 Before carrying out any activity undertaken by sub-contract employees the Contractors Responsible Person shall first undertake a risk assessment taking into account the hazards associated with the work this should include, if appropriate, discussion with the people undertaking the work and **COMPANY** Management.

13 The Risk Assessments produced shall be used, where appropriate, as the basis for
COMPANY personnel checking the contents of sub or work package contractors' safety method statements.

14 Where identified in the Risk Assessment the Contractors Responsible Person will prepare a Method Statement taking account of the following:

- (a) The controls identified in the Risk Assessment.
 - (b) All relevant Safety, Health, Environmental (SHE) matters.
 - (c) The headings, as a minimum, indicated in SHE-FRM-1-03 & 1-04

(Note: the use of the **COMPANY** format Risk Assessment and Method Statement templates may be suggested to the Sub-Work Package Contractor for work carried out on projects and locations under **COMPANY** control).

15 The **Project/Site Manager** will review the Risk Assessment and Method Statement produced using the tracking and content sheet SHE-FRM-1-04. Circulating to relevant parties as required. Following the review he will take account of comments received from other parties and re-circulate Risk Assessment and Method Statement to those people to ensure issues raised have been dealt with adequately.

16 Following agreement of the suitability of the Risk Assessment and Method Statement, the **Project/Site Manager** will issue it to relevant **COMPANY Management/Supervisor** who will then ensure that the contractor's supervisor gives a briefing of the Risk Assessment and Method Statement so that the detail is communicated to all relevant operatives.

17 The **Project/Site Manager** or **Supervisor** will monitor performance against the Risk Assessment and Method Statement and identify and communicate any suggested changes. In cases where any significant changes to the system of work are necessary, activities must be stopped so that the changes to be made are re-assessed and approved. Where appropriate, following any revision, the checking process should be repeated.

task risk identification and control statement (TRICS)

18 The TRICS SHE-FRM-1-05 should be completed prior to commencement of works by the Appropriate **Line Manager**. Where this is not possible or practicable, the individual tradesman



undertaking the task should complete the task assessment. The TRICS format is only to be used after an assessment has been made by the relevant **Manager** and the need to produce a Method Statement for the works has been eliminated.

19 Should the initial TRICS being completed by the tradesman reveal that other assessments (e.g. Manual Handling/Noise) are required the risk assessment guides should be used to develop a safe system of work. Should the safety requirements of the job still not be met then the individual Line Manager shall be contacted immediately.

RECORDS AND MONITORING OF THE RISK ASSESSMENT

20 The Project/Site Manager should maintain up to date current Risk Assessment records so that any significant change to a activity requiring the Risk Assessment to be re-evaluated can be controlled. The need for review will depend upon the level of risk and the significance of the change.

21 Where appropriate to the activity the SHE Advisor for the project will monitor performance and identify any necessary changes by inspection and/or audit.

2.3.1.4 Guidance To This Procedure

RISK ASSESSMENTS

- 1 All Contractors and self-employed persons are required to make suitable and sufficient Risk Assessment of work activities to be undertaken. A record of the significant findings of Risk Assessments must be kept. This record shall state the hazards and risks and the controls needed to reduce the risks to an acceptable level. The controls shall then be implemented by management to protect health and safety and the environment.
- 2 Where Risk Assessments are required to be carried out under particular sections of the Qatar Regulatory Document (Construction), COSH, Noise, Asbestos and Lead etc. a repeat assessment is not required unless other elements of the work demand assessment in their own right (e.g. painting at height may require a COSHH Assessment for the paint as well as an assessment of the risk of working at height or damage to a watercourse due to spillage).
- 3 Where an assessment identifies the likelihood of an adverse health condition or identifiable disease being contracted, then health surveillance may be required. In all such cases the advice of the **SHE Team** shall be sought.
- 4 On completion of a Risk Assessment the record shall then be used to supply the following information to the relevant persons at risk:
 - (a) Hazard/risk/impacts
 - (b) Preventative and protective measures
 - (c) Emergency procedures
 - (d) Name of emergency wardens or incident controllers
 - (e) Instruction and training to carry out the work safely
- 5 All activities undertaken under the Risk Assessment (and controls therein) shall be monitored to ensure that the assessment is both suitable and sufficient and is being worked to.
- 6 Any changes in work must be notified to the competent person who has developed the Risk Assessment and must result in a review of the assessment and if necessary a revised assessment produced.

METHOD STATEMENTS

- 7 Refer to SAMAS 2.4

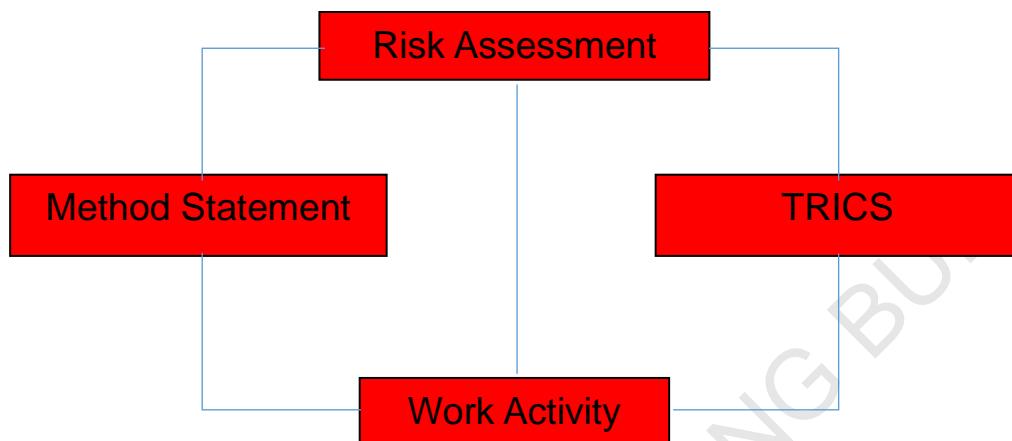
USE OF RISK ASSESSMENT GUIDES

- 8 Refer to SAMAS 2.4

ARAB ENGINEERING BUREAUS

2.3.1.5 Appendices

Appendix 1 – Risk Assessment Process



2.3.1.6 Author

SECTION	NAME	POSITION IN COMPANY	CONTACT DETAILS
		SHE Manager	

2.3.1.7 Approvals

	NAME	POSITION IN COMPANY	SIGNATURE & DATE
Approved by:		SHEQ Director	

SHE-FRM-1-01 - SAFETY, HEALTH & ENVIRONMENTAL RISK ASSESSMENT

Site & Contract No :

Risk Assessment No :

Activity :

Location :

Person Conducting Assessment :

Date :

Person Supervising Work :

Date :

PERSONS EXPOSED

EMPLOYEES : OTHER WORKERS

PUBLIC/VISITORS :

YOUNG PERSONS :

New or Expectant Mothers : Disabled :

Others :

Estimated Total No. of Persons at Risk :

HAZARDS (WHAT MIGHT CAUSE HARM?)

HAZARDS (WHAT MIGHT CAUSE HARM?)			S	H	E		S	H	E
1 Adverse Weather Conditions						17 Loading/Unloading			
2 Cold/Hot						18 Materials			
3 Electricity						19 Moving Parts of Machinery			
4 Excavation						20 New or Expectant Mothers			
5 Fire/Flammable Atmosphere						21 Proximity to Water			
6 Floor/Ground Conditions						22 Scaffold			
7 Flying Particle/Dust						23 Sharp Objects			
8 Hand or Power Tool						24 Stairs/Steps			
9 Hazardous Substance						25 Static Equipment/Machinery			
10 Heat/Hot Work						26 Structure			
11 Lack of Experience						27 Temporary Works			
12 Lack of Training						28 Vehicle/Mobile Equipment			
13 Lack of/too much Oxygen						29 Working Hours/Fatigue			
14 Ladder						30 Workstation Design			
15 Lifting Equipment/Appliances						31 Young Persons			
16 Lighting						32 Other			

RISK FACTOR

Risk Quantifying

Risk Quantifying	No injury, damage or environment impact	Minor injury, damage or environment impact	Major injury, damage or environment impact	Fatality, building loss, catastrophic environment impact
Almost no probability				
A small probability				
A high probability				
Almost Certain				

Acceptable

Unacceptable

Risk Level	Action
Insignificant	No action required and no documentary records need to be kept
Acceptable	No further preventative action. Consideration shall be given to more cost-effective solutions or improvements that impose no additional cost burden. Monitoring required to ensure that controls in place are properly maintained.
Unacceptable	Work shall not be started or continued until the risk level has been reduced to an acceptable risk level. While the control measures selected shall be cost-effective, legally there is an absolute duty to reduce the risk, this means that if it is not possible to reduce the risk even with unlimited resources, then the work shall not be started or shall remain prohibited.

NOTES

- Physical Hazards are the nature of issues that may cause harm. Tick box for hazard.
 - Preventative / Control Measures are the actions that will stop it going wrong.
 - Control measures are to ensure that residual risks are reduced to a minimum. Where controls fail to reduce the risk to a acceptable level then refer assessment to your line manager.
 - If the operations are likely to affect the public or the safe operation of a public infrastructure or transport system, the control measures must reduce the likelihood of significant harm to the level that existed before our work commenced.
 - Where young persons or expectant mothers are involved in the activity, ensure that any additional controls are put in place in accordance with local procedures.
 - In addition to the above, consideration must be given to other individuals' susceptibility due to pre-existing health conditions, e.g. bad back, poor hearing. Additional 'human factors' such as ergonomics, workplace design, etc. should also be considered.
 - Where a hazard is identified that is not listed in the Physical Hazards list, enter the hazard description followed by Other in brackets i.e. (Other).



HAZARD No.	Nature of Risk What Might Go Wrong?	Risk Before Controls U/A	Perceptive /Control Measures How do you Stop it Going Wrong?	Control Measures Implemented By (Name)	Risk After Controls U/A

	Name	Signature	Date
Person Completing the Assessment			
Person Reviewing the Assessment			



(SHE-FRM-1-02) Job/Task Risk Assessment/Method Statement

Section 1 - Job / Task Allocation

To be completed by person taking works order/organising task:

Job / Contract №.:

Client:	Contact Name:	Date:
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Job / Task Location:

Description of work:

Proposed work method:

(additional sheets if required)

Completed By (Name):	Signature:
----------------------	------------

Section 2 - Risk Assessment

To be completed by operative / person undertaking the work/task

Upon arrival at the work location complete this Risk Assessment before starting work. If the responses mean you cannot complete the job/task safely, discuss your concerns with your Manager.

*Delete as required

SAFE SYSTEM	Is the proposed work method (above) acceptable? (If No following this risk assessment a method statement must be produced) Are there any client controls e.g. Permits / clearances certificates etc?	Yes / No Yes / No
SAFETY & SECURITY	Are barriers and signs needed to separate the work area? Do you know the location emergency procedures / fire exits / muster points / First Aid etc? Do power supplies / fire detection systems need isolating	Yes / No Yes / No Yes / No
SAFETY EQUIPMENT	What personal protective equipment is needed (tick relevant boxes)? Safety Footwear <input type="checkbox"/> Safety Helmet <input type="checkbox"/> Hi-Visibility Vests <input type="checkbox"/> Gloves <input type="checkbox"/> Eye Protection <input type="checkbox"/> Hearing Protection <input type="checkbox"/> Dust Masks <input type="checkbox"/> Other(state):	Hearing Protection <input type="checkbox"/>
PLANT & EQUIPMENT	List any items of plant / tools required: (Include drills, saws, compactors, breakers etc...)	
	Are you competent and have you received the training to use them? Are all the plant / tools suitable for use, tested and inspected? Confirm plant / tools will be visibly inspected by the user prior to use?	Yes / No Yes / No Yes / No
HEALTH HAZARDS	Check labels on materials and substances. If hazardous, has a COSHH Assessment been carried out?	Yes / No / NA
EXCAVATION	Have all underground services been located and clearly marked? Are shoring materials on site before starting work?	Yes / No / NA Yes / No / NA
WORK AT HEIGHT	Which is the most appropriate for access (circle as appropriate) Ladder <input type="checkbox"/> Access Tower <input type="checkbox"/> MEWP <input type="checkbox"/> Scaffolding <input type="checkbox"/> If Mobile Elevated Work Platform are you trained and competent to operate? If scaffold / access tower has this been erected by competent person? Will this be inspected by the user prior to use?	Yes / No / NA Yes / No / NA Yes / No / NA

MANUAL HANDLING	Can heavy/awkward items be moved and stacked securely? Is lifting apparatus required? Is a separate Manual Handling assessment required?	Yes / No / NA Yes / No Yes / No
SITE TIDINESS	Are materials in safe area and stacked securely? Are all materials segregated from building users and members of the public?	Yes / No Yes / No
ENVIRONMENT	Are there facilities for the disposal of spent materials or packaging? Do any consents to discharge trade effluent apply or are any required? Are there any risks to trees or other ecology – contact SHE adviser for advise where required Has consideration been given to prevention of nuisance from dust/noise to neighbours	Yes / No / NA Yes / No / NA Yes / No / NA Yes / No / NA
Completed by (Name):	Signature:	Date:

Section 3 – Task Statement

To be completed by operative / person undertaking the work/task if the ‘proposed work method’ does not accurately describe the method of work required, complete the following to explain the safe method of working that will be adopted:

(Explain how the work is going to be done, include things such as plant, materials, access to the work area, manual handling, sequence of work, any limitations, protection to building users, members of public etc.)

Insert names of all members of the work gang and confirm the work method has been explained.

Name and position:	Signature

--

Risk Assessment/ Method Statement – Tracking and Content Sheet (SHE-FRM-1-04)							
Project :		Contractor :					
METHOD STATEMENT TITLE :		DATE :					
Review							
Project/Site Manager	1 st review date	Status*	Name (print)	2 nd review date	Status*	Name (print)	
SHE Function As Required	1 st review date	Status*	Name (print)	2 nd review date	Status*	Name (print)	
Technical Advisor As Required	1 st review date	Status*	Name (print)	2 nd review date	Status*	Name (print)	
Status							
NB: Use the 'Prompt List' below to give a status code, as follows:				*Status			
				A – Work can proceed as described B – Work can proceed when comments are incorporated C – Re-submit and review before work can proceed			
Signed off by COMPANY as current working document		Name:		Signature and date:			
	Prompt List				Yes	No	In Part
1	Fully describes the works/individual tasks/the sequence, method and process in place to identify change requirements?						
2	Names and titles of key personnel/supervisors responsible?						
3	Details resources required eg equipment, plant, men and materials?						
4	Programme of works and working hours identified?						
5	Interfaces/security of the client/public/other contractors identified?						
6	Specific Risk Assessment / attached and satisfactory? <ul style="list-style-type: none">• Are all the hazards identified?• Have all the risks been evaluated? (See item 7)• Are there arrangements in place for reviewing control measures due to changing circumstances?						
7	High risk or safety critical activities identified/controls specified?						
8	Access/scaffolding requirements (including ancillary arrangements such as anchor points) fully detailed and described?						
9	Certificates of competence or qualification of operatives provided?						
10	Certificates for plant/equipment inspection/examination provided?						
11	COSHH, noise, manual-handling issues dealt with?						
12	Personal protective equipment specified?						
13	Permit requirements identified?						
14	Monitoring (checks and inspections) identified?						
15	Any builder's work in connection identified/adequate notice given?						
16	Temporary protection/support identified (eg fire, traffic, services)?						

17	Environmental controls/waste disposal identified?				
18	Craneage/lifting equipment - certificates/checklist/lifting plan in place?				
19	Emergency arrangements/first aid/special welfare/?				

	Prompt List	Yes	No	In Part	N/A
20	Details of toolbox talks to be provided?				
21	Details of temporary works schemes identified, including drawings, calculations and checks?				
22	Workplace environment, design, layout and specific limitations identified, have human factors been taken into consideration, ie experience, fatigue, communication, methods, etc?				
23	Conformation of briefing of method statement to operatives.				
24	Any other (specify)?				

Comment/Observation (if appropriate)

(SHE-FRM-1-05) Task Risk Identification and Control Statement (TRICS)

Section 1 - Task Allocation		
To be completed by person organising task:		
Job / Contract №.: Client:		Date:
Location:		
Description of work:		
LOCATION INFORMATION	Are there any client controls e.g. Permits / clearances certificates etc required?	Yes / No
	Is there a requirement to isolate fixed plant or equipment? Will there be a requirement for Lone Working? Will there be a need to enter a confined space? Are there materials / substances used by the client which could be hazardous to the person carrying out the work Do any consents to discharge trade effluent apply or are any required?	Yes / No Yes / No Yes / No Yes / No Yes / No
If the answer to any of the above is YES, consideration should be given to producing a detailed Method Statement		
The need for a Method Statement has been considered and the issue of this TRICS is acceptable for this work		Yes / No
Completed By (Name):		Signature:
Contact Details		
Review Date		
Section 2 - Risk Assessment		
To be completed by the person undertaking the work/task		
Upon arrival at the work location complete this Risk Assessment before starting work. If the responses mean you cannot complete the job/task safely, discuss your concerns with the person signing above.		
Completed By (Name):		Signature:
Contact Details		
EMERGENCY & SECURITY	Are barriers and signs needed to separate the work area? Do you know the location emergency procedures / fire exits / muster points / First Aid etc? Do power supplies / fire detection systems need isolating	Yes / No Yes / No Yes / No
	The following PPE is mandatory for COMPANY Employees. Safety Footwear <input type="checkbox"/> Safety Helmet <input type="checkbox"/> Gloves <input type="checkbox"/> Eye Protection <input type="checkbox"/>	
SAFETY EQUIPMENT	Indicate if it is available for use	

	<p>What additional personal protective equipment is needed (tick relevant boxes)?</p> <p>Dust Masks <input type="checkbox"/> Hi-Visibility Vests <input type="checkbox"/> Hearing Protection <input type="checkbox"/></p> <p>Other (state):</p>	
HEALTH HAZARDS	<p>Check labels on materials and substances. If hazardous, has a COSHH Assessment been carried out?</p> <p>If yes attached to this TRICS</p>	Yes / No / NA
PLANT & EQUIPMENT	<p>List any items of plant / tools required:</p> <p>(Include drills, saws, compactors, breakers etc...)</p>	
	<p>Are you experienced in their use or received the training to use them?</p> <p>Are all the plant / tools suitable for use, tested and inspected?</p> <p>Plant / tools have been visibly inspected by the user prior to use and no defects apparent</p>	<p>Yes / No</p> <p>Yes / No</p> <p>Yes / No</p>
EXCAVATION	<p>Have all underground services been located and clearly marked?</p> <p>Is there a drawing available for the support work?</p> <p>Are sufficient shoring materials, as identified on the drawing, on site before starting work?</p>	<p>Yes / No / NA</p> <p>Yes / No / NA</p> <p>Yes / No / NA</p>
WORK AT HEIGHT	<p>Which is the most appropriate means of access (circle as appropriate)</p> <p>Access Tower <input type="checkbox"/> MEWP <input type="checkbox"/> Scaffolding <input type="checkbox"/></p> <p>If Mobile Elevated Work Platform are you trained and competent to operate?</p> <p>If scaffold / access tower has this been erected by competent person? Confirm this has been inspected by the user prior to use?</p> <p>If non of the above is practical is a ladder the proposed means of access</p> <p>Specify the type of ladder</p> <p>Indicate the height / no of rungs needed to provide safe access</p>	<p>Yes / No / NA</p> <p>Type.....</p> <p>...</p> <p>Rungs.....</p>
MANUAL HANDLING	<p>Are there any heavy or awkward items be moved or stacked?</p> <p>If lifting equipment is required is it available?</p> <p>Is a separate Manual Handling assessment required?</p>	<p>Yes / No / NA</p> <p>Yes / No</p> <p>Yes / No</p>
SITE TIDINESS WORK AREA	<p>Is there space in the work area to stack / store materials safely and allow access?</p> <p>Are all materials segregated from building users and members of the public?</p> <p>Are there any object / vehicles materials belonging to the client which may be a hazard?</p> <p>Is the area suitably lit to carry out the task safely?</p> <p>Are the ground / floor conditions suitable for the work to be carried out?</p>	<p>Yes / No</p>
ENVIRONMENT	<p>Are there facilities for the disposal of spent materials or packaging?</p> <p>Are there any risks to trees or other ecology – contact SHE adviser for advise where required</p> <p>Has consideration been given to prevention of nuisance from dust/noise to neighbours</p>	<p>Yes / No / NA</p> <p>Yes / No / NA</p> <p>Yes / No / NA</p>

Section 3 – Task Statement

To be completed by the person undertaking the task.

Accurately describe the safe method of working that will be adopted:

(Explain how the work is going to be done, include things such as plant, materials, access to the work area, manual handling, sequence of work, any limitations, protection to building users, members of public etc.)

I confirm that the above statement identifies the hazards and risks associated with the works to be carried out and the control measures identified are in place.

Completed by (Name):	Signature:	Date:
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Insert names of all members of the work gang and confirm the work method has been explained.

Name and position:	Signature