THE Prin									
Audit Date		/ /	THE PAIRATAHI TRUST:		Important:				
Forest:				Auditor name:		Retain a copy			
Region:				Branch number:		of this audit			
Location:				Admin use: Entered	/ /	on file			
Owner:				Actions Closed / /	/				
<u>,                                    </u>				CAR Issued (circle): YE	S NO #				
Audit Frequency				Complete one operational audit each 6 months (140 days) of service.					
Corrective Action				lote all non-compliance on the bottom of page 2 and ensure that you follow up and loseout.					
Company managers:				· · · · · · · · · · · · · · · · · · ·	Administration Secretary within 24hrs				
Copies:				rovide a duplicate copy of this presentative.	form to the Employer (Contractor) or	his/her			
Yes	No		Health and Safety Policy – Drug and Alcohol Management Policy						
		-	The employer has a signed and dated copy of the Health and safety policy. Policies are to be renewed no less than biannually.						
		2		have signed and dated their commitment to the Health and Safety					
		3	The employer has a signed and dated copy of the Drug and Alcohol policy						
			The employees have signed and dated their commitment to the Drug and Alcohol						
		4	policy.						
			Has a pre employment drug test been administered to the newest employee?						
			All employees have signed drug testing consent forms.						
		7	Monthly Health and Safety meetings are held, and records are kept on site and						
			supplied to JNL.  Hazard Management						
			Are hazards properly identified and documented?						
		1	(Lists found in Best Practice guidelines are acceptable).						
			Have all employees received education on all general hazards, and has an						
		,	acknowledgement form been signed by all employees.						
		2	Have pre start Hazard IDs been completed for each new work site. Evidence sighted?						
			Is the pre start hazard ID, i.e. is the site hazard and control system			perational, and			
		4	are you satisfied that it is working.						
		5	Are visitors p						
			Can the employee DKO the hazard management process? Identify, evaluate,						
		6	control EIM, monitor.						
			Employee Induction						
			All employees inducted into the contractors systems. Evidence sighted?						
					ollowing? H&S Policy, D&A po Best practice guidelines, pre st				
		_	-	<u> </u>		art nazara ibo,			
			emergency procedures label, incident reports?  Inspections and Audits						
			A safety inspection of plant, equipment and vehicles has been completed within the						
		-	last 31 days	st 31 days					
				entified in the monthly ins	pections as actions or in need	of			
		2	repair/replacement have been corrected within the allocated time frames						

		3	Self audits are completed monthly and records have been kept.							
			Training and Supervision							
		1	Are all employees 'trained for task' or documented 'under training' and appropriately							
			supervised. Are training records kept on site?							
		2	Are supervision records being kept for any new employees under training?							
			Personal Protective Equipment							
		1	PPE is supplied to all employees by the contractor.							
		2	A PPE register is on site, is current, and is signed by employees.							
			Emergency Management							
		1	Emergency procedure stickers are in all machines and crew vehicles.							
			The newest member of the crew can communicate the emergency procedure,							
		2	including crew location, GPS co-ordinate use, and appropriate radio channel to be							
		_	used. Can use radio with confidence.							
		3	First aid kits have required stocks, i.e. suitable for purpose as per recommended list							
			Health Assessment and Monitoring							
		1	Has a general health questionnaire been completed by the newest employed Records available if requested?	ee.						
		2	·							
			Incident Management							
		1								
		<ul><li>Incident register on site?</li><li>Near hits recorded, investigated, and reported as they happen?</li></ul>								
	2   Serious harm injuries immediately reported to JNL and Department of Labour									
		notified?								
			Employees understand benefit of early return to work and appropriate form	s are						
	available on site.									
(Reco	Peconfigure this section or add to it so that questions are relevant to operation – otherwise use N/A)									
	Nor									
#	Sun	nma	narize and list any non-compliance items  AR # By Whom  E	By When						
	•									
Principal Contractor:										
Operations Manager: (sign/date when fully completed)										