

Pre-qualification Questionnaire for acceptance onto the Eurosafes UK Approved List of Contractors for Health and Safety Contractors with 5 or more employees

N.B.:- Please ensure all requested documents are included with your submission, as failure to do this will delay your submission

Section 1 – Your Organisation

	Information Requested	Guidance Notes as applicable	Response
A	Please state category you wish to be approved under corresponding to the role you will be fulfilling.	<ul style="list-style-type: none"> • Principal Contractor • Repair and Maintenance Contractor • Facilities Contractor • Trade Contractor (including specialist trades) 	
B	State the name of your organisation, full address, main telephone number, e-mail address and web site address.		
C	State the name of the person dealing with this questionnaire, their contact phone/fax numbers and e-mail address.	<i>Also please supply details of a secondary contact, detailing; name, title, phone/fax and email address.</i>	
D	What was the turnover of your organisation for your last completed financial year?	<i>This information is needed so that you can be fairly assessed in relation to the size of your business</i>	

Section 2 – Health and Safety Policy

E	<p>Please list the number of individuals currently employed in the following areas:-</p> <ul style="list-style-type: none"> • Office based managers • Site based managers • Site based operatives • Labour only sub-contractors 	<p><i>e.g. directors, contracts managers</i> <i>e.g. site managers, foremen</i> <i>e.g. tradesmen, labourers etc.</i> <i>Self-employed operatives</i></p>	
F	<p>Please provide a copy of your current health and safety policy.</p>	<p><i>The policy should include:-</i></p> <ul style="list-style-type: none"> • <i>a signed statement of intent</i> • <i>a responsibilities section</i> • <i>an arrangements section.</i> <p><i>The policy must be up to date and include references to latest relevant legislation.</i> <i>This policy should be specific and applicable to your organisation.</i></p>	
G	<p>Competent Health & Safety advice.</p>	<p><i>Please provide details of how your organisation and your employees have ready access to competent H&S advice, preferably within your organisation. Provide the name and competency details of the source of advice including a CV and evidence of competence e.g. copies of certificates/professional membership. (Where external advice is used, please attach a letter of appointment.)</i></p>	
H	<p>How does your organisation keep up to date with changes in health and safety legislation?</p>	<p><i>Legislation is constantly changing and your business needs to have clear procedures for identifying and implementing such changes.</i> <i>e.g. membership of industry and other relevant forums</i></p>	

Section 3 – Insurances

I	<p>Please provide a copy of your PLI and ELI insurance certificates and</p>	<p><i>It is important that BOTH insurances are submitted.</i> <i>Your broker will assist with any queries you may have.</i></p>	
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	<ul style="list-style-type: none"> • Trade Contractor (including specialist trades) 	<p><i>organisation's activities.</i></p> <ul style="list-style-type: none"> • <i>Site operatives and management must have the CSCS card or equivalent (e.g. ECS) appropriate to their occupation with additional training as required e.g. mobile tower erection, work at height etc. training. (CCNSG and other equivalent competency schemes may also be acceptable).</i> <p><i>Evidence of other training should also be included e.g. IPAF, PASMA etc. Please note that trade training such as City and Guilds, HNC etc. is not classified as health and safety training.</i></p> <p><i>Copies of cards are required for CSCS & IPAF – Not just certificates</i></p>	
L	<p>Please provide details and certificates as evidence of current first aid training/arrangements for:-</p> <ul style="list-style-type: none"> • Appointed persons. • EFAW (Emergency First Aid at Work) persons • FAW (First Aid at Work) persons 	<p><i>The First Aid Regulations 1981 require an assessment to be made of your first aid requirements on <u>all</u> sites regardless of size. (Reference should be made to the ACoP second edition). Appendix 1 details criteria which should be considered and Appendix 3 details suggested numbers required.</i></p> <p><i>Training must be delivered by an HSE approved organisation and the course content should be in accordance with the contents listed in Appendix 4 and 5 of the ACoP. Refresher training courses should include the contents detailed in Appendix 6.</i></p> <p><i>.Evidence of this training, and the individual to which it relates should be in evidence on the training matrix</i></p>	
M	<p>Please provide evidence of management and operative asbestos awareness training. Provide confirmation that the course meets the requirement of Regulation 10 of the Control of Asbestos Regulations.</p>	<p><i>This is a key requirement of the Control of Asbestos Regulations 2006. Please note that the training must be formal asbestos awareness training given by a qualified/competent trainer with annual refresher training given by a competent person. Please provide evidence of trainer's asbestos related qualifications to evidence competence. <u>The training should be included within your training matrix.</u></i></p>	

Section 5 – Risk Assessment

N	As required by the Management of Health and Safety at Work Regulations 1999 please provide an example risk assessment for an element of work on a construction site that you have recently undertaken.	<i>The risk assessment needs to be for a specific task such as the use of a power tool, the use of a mobile tower scaffold etc.</i>	
O	If applicable, please detail your procedures for controlling hot works on a typical project. Contractors engaged in electrical work should detail their formal procedures and permits for dealing with electrical isolation and energising.		

Section 6 – Accidents /Prosecutions etc.

P	Under your current name, or any previous title, please give details of any HSE improvement or prohibition notices, and any prosecutions in the last five years.	<i>Where any notice of prosecution is declared, please provide details of the notice of prosecution and actions taken.</i>	
Q	Provide details of the number of RIDDOR accidents /incidents in the last 3 years.	<i>Include details of any actions taken to prevent re-occurrence. Where available please confirm your injury incidence and frequency rates.</i>	

Section 7 – Sub-Contractor Appointment

R	If your company appoints sub-contractors to undertake work on your behalf please submit a vetting exercise to evidence how you ensure that only sub-contractors who are competent in health and safety issues are appointed.	<i>Please provide evidence of an <u>actual</u> successful vetting exercise that you have undertaken on a sub-contractor. The vetting exercise must include all documentation received from the sub-contractor and must be for a sub-contractor you have deemed competent. Provide details of your arrangements for vetting of contractors, this should form part of your health and safety policy arrangements.</i>	
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Section 8 – Monitoring/Consultation

S	Provide details of the company system for monitoring procedures and auditing them at regular intervals.	<i>Please provide evidence such as copies of formal reports, <u>site inspection reports</u>, evidence of recent monitoring and management responses.</i>	
T	Provide details of how the company communicates with the workforce on Health & Safety Matters.	<i>Please provide details of your company arrangements and details of any appointed safety representatives together with evidence of how consultation is carried out such as records/minutes of any safety meetings, toolbox talks, team briefings etc.</i>	

Section 9 – Equipment Maintenance

U	Provide details of arrangements for selecting, inspecting and maintaining work equipment to ensure safe conditions to the required standards.	<i>Provide details of your equipment policy arrangements and evidence of equipment inspection/maintenance e.g. plant inspection register, ladder inspection register etc. with certificates of testing and inspection.</i>	
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Section 10 – Corporate Competence

V	Is your company a member of any trade associations or accreditation bodies e.g. UKAS, ECA, NICEIC, Gas safe etc.	<i>Provide copies of current membership or accreditation certificates.</i>	
	Please list any further relevant accreditations i.e. ISO 9001, 14001,18001	<i>Please supply copies of current accreditation.</i>	
	Has your company successfully completed an assessment and been accredited by another SSIP registered member	<i>Provide copy of certificate(s) as evidence. -</i>	

Section 11- Payment

W	Submission Fee	£330.00 inc. VAT	Method of payment: Cheque <input type="checkbox"/> On line <input type="checkbox"/>
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Finally, it is worth noting that all documentation etc. that we are requesting relates to your legal duties under current health and safety legislation. If you are unsure of any issues raised you may find it beneficial to visit www.hse.gov.uk or to consult a local health and safety consultant.

EXAMPLE TRAINING MATRIX

Individual	Role	SMSTS	CSCS card	Asbestos awareness	4 Day First Aid	Appointed First Aid	NEBOSH General Certificate	IPAF	PASMA	Others
A. Brown	Director			May 2011						
B. Black	Director	July 2011		May 2011						
C. Green	Contracts Manager	July 2011	June 2011	May 2011						
D. Orange	Foreman		June 2011		Jan. 2011					
E. White	Labourer		June 2011	May 2011						
F. Pink	Joiner			May 2011	May 2011					



EUROSAFE UK PRE-QUALIFICATION EXERCISE

SUBMISSION CHECKLIST

*In ALL cases, please supply completed documents, **NOT** generic templates.*

<u>Item reference</u>	<u>Information Required</u>	<u>Information Included</u>	<u>Comments</u>
<u>A</u>	Contractor Category		
<u>B</u>	Company details		
<u>C</u>	Contact name		
<u>D</u>	Turnover		
<u>E</u>	Employee numbers		
<u>F</u>	Health & safety policy		
<u>G</u>	Evidence of competent H&S advice		
<u>H</u>	Legislation updates		
<u>I</u>	PL and EL insurances		
<u>J</u>	Training matrix		
<u>K</u>	Evidence of training		
<u>L</u>	First Aid training		
<u>M</u>	Asbestos training		
<u>N</u>	Risk assessment		
<u>O</u>	Hot work procedures		
<u>P</u>	HSE notices		
<u>Q</u>	Details of RIDDOR incidents/accidents		
<u>R</u>	Sub-contractor vetting		
<u>S</u>	Evidence of procedure monitoring/auditing		
<u>T</u>	Evidence of workforce consultation		

<u>U</u>	Evidence of equipment inspection/maintenance		
<u>V</u>	Evidence of Corporate Competence		
<u>W</u>	Payment of £330 inc. VAT		

Once you have completed the questionnaire please take the time to complete the table above to ensure that you have included all the necessary documentation with your return. The return should then be sent to:

**Eurosafe UK
Eurosafe House
Centurion Park
Tribune Way
York
Y030 4RY**

Telephone: - 01904 691 515

E-mail:- cdm-competent@eurosafeuk.co.uk

Submit on line: - www.ssipassessors.com

www.eurosafeuk.co.uk

www.cloudsuk.com

www.constructionforums.co.uk

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