**School Contractor Management Pack**

**Small scale Construction Works and**

 **Building Maintenance**

**Please note:** With limited exceptions, works to property must be progressed via the Property Division, whose officers will ensure all necessary and appropriate standards and regulations are applied including The Construction (Design and Management) Regulations 2015.

**Schools are strongly recommended to arrange all construction and building maintenance works through the Property Division to ensure compliance with these standards and regulations.**

|  |  |
| --- | --- |
| **School:** |  |
| **Headteacher:** |  |
| **Site Manager:** |  |
| **Form Completed by:** (*School’s Commissioning Manager)* |  |

|  |  |
| --- | --- |
| **Contractor:** |  |
| **Planned Work:** |  |
| **Area of Work:** |  |

**Contents of pack;**

* 1) [Pre-Qualification Checklist](#Prequalification)
* 2) [Contractor Safety/Risk Assessment Checklist](#Riskassessment)
* 3) [Managers’ Pre-start Checklist](#Prestart)
* 4) [Authorisation to work form](#Authorisation)
* 5) [Contractor Safety Assurance Checklist](#monitoring)

**1) Pre-Qualification Contractor Checklist**

*(To be completed by the School’s Commissioning Manager prior to employing a contractor)*

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| --- | --- |
| **Questions:** | **Yes/No** |
| Have you checked the contractor’s Employers and Public/Products Liability insurances and kept a copy for your records? |  |
| Are the insured amounts sufficient? *(Please refer to Appendix 2 of the SWP Control of Contractors – Construction and building maintenance)* |  |
| Have you requested and kept a copy of the contractor’s Health & Safety Policy?(Mandatory for contractors with 5 or more employees, Desirable for contractors with less than 5 employees) |  |
| Does the contractor have a nominated person who is responsible for Health & Safety?Name of person: |  |
| Does the contractor provide Health & Safety training for their employees? What training is provided? (List) |  |
| Has the contractor had any HSE Prosecutions or Notices in the last 5 years (or pending) |  |
| Has the contractor had any RIDDOR\* reportable incidents in the last 3 years? |  |
| Does the contractor hold any Professional Accreditations? |  |
| Do the employees hold any Professional Accreditations for the required work? |  |
| Have the employees been DBS checked? |  |
| If the employees have not been DBS checked does the school have sufficient resources to accompany the contractor at all times whilst they are on site? |  |

\* RIDDOR – Reporting of Injuries, Diseases and Dangerous Occurrences Regulations

**2) Contractor Safety/Risk Assessment Checklist**

Part i) *-to be completed by the appropriate School Manager / School Representative*

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| --- | --- |
| **Questions** | **Yes/No** |
| Has the Contractor provided a site specific, task specific Risk Assessment and have you kept a copy for your records?*(Mandatory for Contractors with 5 or more employees, desirable for Contractors with less than 5 employees)* |  |
| Is the Risk Assessment Suitable and Sufficient?*(Please seek professional Health & Safety advice to review the R.A if required)* |  |

Part ii) Contractor Safety Checklist

*(To be completed by the Contractor’s employee on site prior to the commencement of work)*

|  |  |  |  |
| --- | --- | --- | --- |
| Company name: |  | Location: |  |
| Description of work: | Date/Time: |  |
| Estimated finish time: |  |

|  |  |  |
| --- | --- | --- |
| 1. General | Yes/ No/ N/A | Control Measures |
| Have you had a site induction? |  |  |
| Do you know where the emergency assembly point is? |  |  |
| Have you made provisions for first aid cover? |  |  |
| Have you seen the asbestos register? |  |  |

|  |  |  |
| --- | --- | --- |
| 2. Work EquipmentWill you be using any of the following? | Yes/ No/ N/A | Control Measures |
| Scaffolding |  |  |
| Powered access equipment |  |  |
| Ladders |  |  |
| Cranes/hoists |  |  |
| Welding/cutting/grinding equipment |  |  |
| Portable electrical equipment |  |  |
| - If so, is it PAT tested |  |  |
| Other work equipment - please specify; |  |  |

|  |  |  |
| --- | --- | --- |
| 3. Hazardous SubstancesWill you be using any of the following? | Yes/ No/ N/A | Control Measures |
| Flammable liquids/gases |  |  |
| Harmful/Irritant/Corrosive Substances |  |  |
| Toxic Substances |  |  |
| Other substances – please specify; |  |  |
| Do you have a CoSHH\* assessment? |  |  |
| Do you have material safety data sheets? |  |  |

|  |  |  |
| --- | --- | --- |
| 4. Permit to Work\*\*Will the work be controlled by any of the following permits? | Yes/ No/ N/A | Control Measures |
| Confined Spaces |  |  |
| Hot work |  |  |
| Roofing |  |  |
| Trenching/Excavation |  |  |
| Line breaking |  |  |
| Live electrical work |  |  |

|  |  |
| --- | --- |
| Contractor Signature: |  |
| School Representative Signature: |  |

\* Control of Substances Hazardous to Health

\*\* Please refer to SWP Permit to Work to identify when a permit to work is required

**3) Manager’s pre-start checklist**

*(To be completed by a School Manager / School Representative)*

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| --- | --- |
| **Questions** | **Yes/No** |
| Have you provided a site induction and explained the emergency fire evacuation procedure to the contractor? |  |
| Have you shown the contractor the Asbestos Register (if applicable)? |  |
| Have you assessed the risks of the work and agreed action to control the risks with the contractor? |  |
| Have you provided the contractor with information on any known hazards or risks on the premises that they should be aware of? |  |
| Have you put in place arrangements with the contractor to co-ordinate your activities during the work? |  |
| Have you identified who will supervise / monitor the work and how? |  |

**4) Authorisation to Work**

|  |  |
| --- | --- |
| **Contractor:** |  |
| **Responsible Person:** |  |
| **Contact Number:** |  |
| **Contractors Mobile:** |  |
| **Office Number:** |  |

|  |  |
| --- | --- |
| **Location of Work:** |  |
| **Description of Work:** |  |
| **Special Safety Conditions?** |  |

|  |  |  |  |
| --- | --- | --- | --- |
| **Document valid from Date:** | **Time:** | **Until Date:** | **Time:** |
|  |  |  |  |

**Contractor Declaration:**

*(To be completed by the Contractor’s Employee/supervisor on site)*

**Acceptance:** I accept responsibility for ensuring that the conditions in this document are correct and brought to the attention of persons on site and agree that safe working procedures will be implemented and confirm that all personnel are adequately trained and will work only on the jobs/equipment specified in accordance with these conditions.

*(Please sign overleaf)*

**Contractor Declaration (continued):**

|  |  |
| --- | --- |
| Contractor’s Employee/Supervisor on site Name: (Print) |  |
| Signature: |  |

|  |  |  |  |
| --- | --- | --- | --- |
| Date: |  | Time |  |

**Authorisation to Work:**

*(To be completed by the School’s Manager/ Representative in charge of the work)*

I confirm as the Manager/representative of the school that I have completed all the required checks in respect of Health & Safety matters in order to allow the contractor to commence work. Monitoring of the contractor will be carried out during and on completion of the works.

I authorise the contractor to commence work.

|  |  |
| --- | --- |
| Manager/ School Representative Name: (Print) |  |
| Signature: |  |

|  |  |  |  |
| --- | --- | --- | --- |
| Date: |  | Time |  |

**Completion of Works:**

*(To be completed by the School’s Manager/ Representative in charge of the work)*

I confirm as the Manager/representative of the school that the work for which this authorisation was issued is now suspended / completed\*. All equipment and tools have been removed from site and the site has been left safe.

(\*please delete as applicable)

|  |  |
| --- | --- |
| Manager/ School Representative Name: (Print) |  |
| Signature: |  |

|  |  |  |  |
| --- | --- | --- | --- |
| Date: |  | Time |  |

**5) Safety Assurance**

Contractors are responsible for supervising their own work and for ensuring that they work safely, however Schools must review the contractor’s health and safety management arrangements periodically during the project and ensure any welfare facilities provided for the contractor remain adequate throughout the project.

For assurance that the area remains safe for School pupils, staff, and visitors the school should conduct regular inspections. The safety assurance checklist can be used to assist this process.

**Safety Assurance Checklist**

|  |  |
| --- | --- |
| **Contractor:** |  |
| **Area of Work:** |  |
| **Description of work:** |  |
| **Date of Inspection:** |  |
| **Person carrying out inspection:***(School Manager/Representative)* |  |

|  |  |  |  |
| --- | --- | --- | --- |
| **Question:** | **Yes** | **No** | **N/A** |
| Is the work area safely cordoned off to prevent access to school pupils, staff, and other school visitors? |  |  |  |
| Is there any signage displayed? |  |  |  |
| Is the site traffic management plan being adhered to and site traffic kept segregated from school traffic and pedestrians? |  |  |  |
| Are School procedures being followed as per the induction provided? |  |  |  |
| Is the School signing in procedure being adhered to if required? |  |  |  |
| Is the fire evacuation route kept clear? |  |  |  |
| Is there a clear route for people to safely pass the work area unimpeded? |  |  |  |
| Are any ladders or stepladders positioned safely away from walkways? |  |  |  |
| Are there any trailing cables or other trip hazards on walkways? |  |  |  |
| Are there any slip hazards on walkways? |  |  |  |
| Are all materials stored away from walkways? |  |  |  |
|  |  |  |  |
| Other issues noted: |  |  |  |
|  |  |  |  |
|  |  |  |  |
| **Action Required?** |  |  |  |
| **Actions taken:** |
|  |