CONTRACTING LTD

PERSONAL PROTECTIVE EQUIPMENT ISSUE REGISTER

SITE: SEBASTIAN STREET

OPERATIVE NAME	HARD HAT	SAFETY GLASSES	HI-VIS VEST	GLOVES	EAR DEFENDERS/ PLUGS	DUST MASK FFP3	REASON FOR ISSUE / REISSUE				SIGNATURE	DATE
							New	Lost	Damaged	Wear and Tear		
C.NEON			V			V						17-9-19
K.KULSINSKAS			V	V		V						17-9-19

Page -

RAPHAEL CONTRACTING LTD

TRAINING AND DEVELOPMENT PLAN

SHORT TRAINING SESSION ATTENDANCE SHEET

OL BOX TALK No 4 ETHOD STATEMENTS AND RISK ASSES.	Date: 17/09/19
: SEBASTIAN STREET	Start Time: 930
(Minutes) 30	End Time: 1000
rs name: K.KULSINSKAS	Presenters Signature:

Candidate's Name	Name of Employer	Candidate's Signature
NEALE	RCL	I confirm that I have understood the Tool Box Talk
		I confirm that I have understood the Tool Box Talk
		I confirm that I have understood the Tool Box Talk
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		I confirm that I have understood the Tool Box Talk

laim information

lms can only be made for your employees or labour-only sub-contractors

No. Attended	Duration	Total Time	Employer Reference 2453745

lbox Talk No. 4 METHOD STATEMENTS AND RISK ASSESSMENTS

IOD STATEMENTS

ethod statements are a written list of operations, to be carried out in a specified sequence, in order complete a work activity in a safe manner

'eryone involved in a job for which a method statement has been written should read it and sign as ıving done so

'ell-written method statements address all the hazards present and plan the work so that the risk of :cident is eliminated or reduced to an acceptable level

ost method statements also include the risk assessments for the same job so that operatives can ad what hazards have been considered and how the risk of accidents have been overcome

ASSESSMENTS

l employers have a legal duty to prepare risk assessments for work activities that could foreseeably sult in injury to persons or damage to equipment

sk assessments outline the ways in which the job could result in injury or damage and the measures ıt in place to ensure that the chance of anything going wrong is eliminated or reduced to an :ceptable level

nployers with five or more employees must have written risk assessments

there are less than five employees, the risk assessments must still be carried out although there is no gal duty to write them down

nployers also have a legal duty to communicate the findings of the risk assessment to operatives who ay be affected by it

ıerefore, depending upon the size of your company, you should either be told, or be asked to read, hat the risks and control measures are for each job that you carry out

ıere is no specified way for laying out a risk assessment so you must familiarise yourself with the way ›ur employers lay out theirs

many cases, the risk assessments are part of the method statement

RAPHA CONTRACTING

METHOD STATEMENT INDUCTION

ATTENDANCE SHEET TO BE COMPLETED FOR ALL METHOD STATEMENT TALKS
(METHOD STATEMENTS ISSUED TO ALL PRESENT)

CONTRACT:	Sebastian Street	MS REF:	001

	NAME (PRINT)	DATE ATTENDED	SIGNATURE	COMMENTS
1	K.KULSINSKAS	9-9-19		I confirm that I have read and understood the Risk Assessment and Method Statement
2	C.NEALE	17/9/19		I confirm that I have read and understood the Risk Assessment and Method Statement
3				I confirm that I have read and understood the Risk Assessment and Method Statement
4				I confirm that I have read and understood the Risk Assessment and Method Statement
5				I confirm that I have read and understood the Risk Assessment and Method Statement
6				I confirm that I have read and understood the Risk Assessment and Method Statement
7				I confirm that I have read and understood the Risk Assessment and Method Statement
8				I confirm that I have read and understood the Risk Assessment and Method Statement
9				I confirm that I have read and understood the Risk Assessment and Method Statement
10				I confirm that I have read and understood the Risk Assessment and Method Statement

Signed: Position: SUPERVISOR

Print Name: K.KULSINSKAS Date: 09/09/-19

WHEN COMPLETED RETURN THIS FORM TO THE RCL SAFETY OFFICER
Note on this side any points that have arisen which you may think should be brought to the attention of RCL and complete the attendance list above (add an extra sheet if necessary)

[redacted] CONTRACTING LTD

Site Manager's Daily Safe Start

Contract:	Sebastian Street	Site Manager:	KES KULSINSKAS	Date (w/c):	16/09/19	Method statement (s) (Title, Rev No. & Rev date)	001

Location and description of works: SKIRTING, WINDOW BOARDS AND DOOR FRAMES L-1

Site Manager's Daily Sign Off

	Date	Name	Signature	Hot Topics of the Day *(the main points you discussed)*
Monday	16-09-19	KES		
Tuesday	17-09-19	KES		PPE
Wednesday	18-09-19	KES		DUST MASK
Thursday	19-09-19	KES		
Friday	20-09-19	KES		
Saturday				
Sunday				

Operatives Daily Sign Off

Name	Signature	M	T	W	T	F	S	S	Comments
C. NEAL		X	V	V	X	X			

NOTE IF YOU HAVE MORE THAN 10 OPERATIVES ON SITE, PLEASE USE THE CONTINUATION SHEET

If the answer to any question below is NO, do not start work until the issues are resolved			
1. Method statements, risk assessments and permits	✓		
Have you read and understood the method statement and risk assessment for the task?	✓		
Is everyone on your team briefed on the method statement for the task?	✓		
Have you carried out your weekly toolbox talk? Please give title of toolbox talk:	✓		
Do you have COSHH Assessments and Safety Data Sheets in place for all hazardous substances that will be used?	✓		
Have you carried out Manual Handling Assessments and planned for any deliveries / extraordinary activities?	✓		
2. Place of work			
Are you satisfied that your team has a safe place to work?	✓		
Have you checked access equipment has been inspected as required and certification issued? E.g. Podium steps, scaffold towers			✓
Are other contractors working adjacent to you aware of what you are doing today? Are you aware of what they will be doing?	✓		
Are third parties and members of the public securely protected from falling materials?			✓
Does your team know the safe access and egress routes to their places of work?	✓		
3. Task specific			
Are all necessary tools and equipment on site to carry out your work in a safe / efficient manner?	✓		
Are you confident there are no health and safety risks in your work task(s)?	✓		
Are you certain that the operatives you are putting to work are competent for their assigned tasks?	✓		
Are the team equipped with the correct PPE to carry out the task?	✓		
4. Variations			
Have the team members changed? (If yes revise)		✓	
Has the task or working environment changed significantly to require a risk assessment and method statement (If yes, work to stop and new method statement to be produced)		✓	
Remember, as the supervisor YOU are responsible for the safety of YOUR team			

RAPHA CONTRACTING

PERSONAL PROTECTIVE EQUIPMENT ISSUE REGISTER

SITE: St Pauls School Phase 2

OPERATIVE NAME	HARD HAT	SAFETY GLASSES	HI-VIZ VEST	GLOVES	EAR DEFENDERS / PLUGS	DUST MASK FFP3	REASON FOR ISSUE / REISSUE				SIGNATURE	DATE
							New	Lost	Damaged	Wear and Tear		
RAJ CANACKAI				✓						✓		31/7/19
V. BALIULEVICIUS				✓						✓		1/8/19
S. SIMONOVIC						✓				✓		6/8/19
J. MUSHKONE				✓						✓		6/8/19
K. O'Malley.						✓	✓					16/8/19.
S. SIMONOVIC		✓										↑
↓		↓								✓		20/02/19
S. SIMONOVIC						✓				✓		02/09/19
A. LUCIAN (AGY)	✓	✓	✓	✓			✓					10/09/19
V. CIUMOC (AGY)	✓	✓	✓	✓			✓					10/09/19
S. SIMONOVIC		✓		✓						✓		11/09/19
C. RANICI		✓					✓					19/09/19
N. PATEL				✓			✓					19/09/19

PAGE 2

RAPHA CONTRACTING

TRAINING AND DEVELOPMENT PLAN
SHORT TRAINING SESSION ATTENDANCE SHEET

Title: HAZARDOUS WASTE (RCL 81)	**Date:** 18/09/2019
Location: ST PAULS SCHOOL Phase 2	**Start Time:** 10:00
Duration (Minutes) 30 mins	**End Time:** 10:30
Presenters name: Jason. Wray	**Presenters Signature:**

Candidate's Name	Name of Candidate's Employer	Candidate's Signature
P. O'DONAVAN	RAPHAEL CONTRACTING LTD	
K. JADVA	RAPHAEL CONTRACTING LTD	
S. HIRANI	RAPHAEL CONTRACTING LTD	
D. HENNESSY	RAPHAEL CONTRACTING LTD	
J . KEARNS	RAPHAEL CONTRACTING LTD	
R. CANACRAI	RAPHAEL CONTRACTING LTD	
M. DANDY	RAPHAEL CONTRACTING LTD	
K. O'MALLEY	RAPHAEL CONTRACTING LTD	
J. MUSTICONE	RAPHAEL CONTRACTING LTD	
J. DYSON	RAPHAEL CONTRACTING LTD	

Grant Claim information

Note: Claims can only be made for your employees or labour-only sub-contractors

No. Attended	Duration	Total Time	Employer Reference
10	30 mins	5 Hours	2453745

RAPHA CONTRACTING

TRAINING AND DEVELOPMENT PLAN
SHORT TRAINING SESSION ATTENDANCE SHEET

Title: STOP THINK ! OSBORNE CONSTRUCTION SAFETY UPDATE	**Date:** 19/09/2019
Location: ST PAULS SCHOOL Phase 2	**Start Time:** 09:00
Duration (Minutes) 30 mins	**End Time:** 09:30
Presenters name: Jason. Wray	**Presenters Signature:**

Candidate's Name	Name of Candidate's Employer	Candidate's Signature
P. O'DONAVAN	RAPHAEL CONTRACTING LTD	
K. JADVA	RAPHAEL CONTRACTING LTD	
S. HIRANI	RAPHAEL CONTRACTING LTD	
D. HENNESSY	RAPHAEL CONTRACTING LTD	
M . DANDY	RAPHAEL CONTRACTING LTD	
R. CANACRAI	RAPHAEL CONTRACTING LTD	
J. DYSON	RAPHAEL CONTRACTING LTD	
K. O'MALLEY	RAPHAEL CONTRACTING LTD	
S. SIMONOVIC	RAPHAEL CONTRACTING LTD	
J. MUSTICONE	RAPHAEL CONTRACTING LTD	
N. PATEL	RAPHAEL CONTRACTING LTD	
C. PARANICI	RAPHAEL CONTRACTING LTD	

Grant Claim information

Note: Claims can only be made for your employees or labour-only sub-contractors

No. Attended	Duration	Total Time	Employer Reference
12	30 mins	6 Hours	2453745

RAPHAEL CONTRACTING LTD

TRAINING AND DEVELOPMENT PLAN

SHORT TRAINING SESSION ATTENDANCE SHEET

Title: Green Purchasing	**Date: 18.09.19**
Location: Wembley W03	**Start Time: 10:30**
Duration (Minutes) 30min	**End Time: 11:00**
Presenters name: A. Kulsinskas	**Presenters Signature:**

	Candidate's Name	Name of Employer	Candidate's Signature
1	Joseph Smith	RCL	I confirm that I have understood the Tool Box Talk
2	D'RASCIAN	RCL	I confirm that I have understood the Tool Box Talk
3	BARNARD	RCL	I confirm that I have understood the Tool Box Talk
4			I confirm that I have understood the Tool Box Talk
5			I confirm that I have understood the Tool Box Talk
6			I confirm that I have understood the Tool Box Talk
7			I confirm that I have understood the Tool Box Talk
8			I confirm that I have understood the Tool Box Talk
9			I confirm that I have understood the Tool Box Talk
10			I confirm that I have understood the Tool Box Talk
11			I confirm that I have understood the Tool Box Talk
12			I confirm that I have understood the Tool Box Talk
13			I confirm that I have understood the Tool Box Talk
14			I confirm that I have understood the Tool Box Talk
15			I confirm that I have understood the Tool Box Talk

Grant Claim information

Note: Claims can only be made for your employees or labour-only sub-contractors

No. Attended	Duration	Total Time	Employer Reference
3	30 min.	1.5 hours.	2453745

RAPHAEL CONTRACTING LTD

TRAINING AND DEVELOPMENT PLAN

SHORT TRAINING SESSION ATTENDANCE SHEET

Title: WORKING of A LADDER/TOWER	**Date:** 17-9-19
Location: MAGGIES	**Start Time:** 730
Duration (Minutes) 30 MINS	**End Time:** 8.00
Presenters name: J GOSMAN	**Presenters Signature:**

	Candidate's Name	Name of Employer	Candidate's Signature
1	H GORASIA	RCL	I confirm that I have understood the Tool Box Talk
2	R RAMA	RCL	I confirm that I have understood the Tool Box Talk
3	H DANSI	RCL	I confirm that I have understood the Tool Box Talk
4	A MOTTCHANAE	RCL	I confirm that I have understood the Tool Box Talk
5			I confirm that I have understood the Tool Box Talk
6			I confirm that I have understood the Tool Box Talk
7			I confirm that I have understood the Tool Box Talk
8			I confirm that I have understood the Tool Box Talk
9			I confirm that I have understood the Tool Box Talk
10			I confirm that I have understood the Tool Box Talk
11			I confirm that I have understood the Tool Box Talk
12			I confirm that I have understood the Tool Box Talk
13			I confirm that I have understood the Tool Box Talk
14			I confirm that I have understood the Tool Box Talk
15			I confirm that I have understood the Tool Box Talk

Grant Claim Information

Note: Claims can only be made for your employees or labour-only sub-contractors

No. Attended	Duration	Total Time	Employer Reference
4	30MINS	2HRS	2453745

RAPHAEL
CONTRACTING LTD

Site Manager's Daily Safe Start

Contract:	Maggies	Site Manager:	J. Godman	Date (w/c):	16-9-19	Method statement (s) (Title, Rev No. & Rev date)	General Carpentry and Joinery Rev. B 20/06/19

Location and description of works:

Site Manager's Daily Sign Off

	Date	Name	Signature	Hot Topics of the Day *(the main points you discussed)*
Monday	16-9-19	J. Godman		SNAGS + GARDEN Room
Tuesday	17-9-19	J. Godman		GARDEN Room
Wednesday	18-9-19	J. Godman		GARDEN Room
Thursday	19-9-19	J. Godman		GARDEN Room
Friday	20-9-19	J. Godman		GARDEN Room + EXTRAS
Saturday				
Sunday				

Operatives Daily Sign Off

Name	Signature	M	T	W	T	F	S	S	Comments
H GONASIA		✓	✓	✓	✓	✓			
R RAMA		✓	✓	✓	✓	✓			
H DANSI		✓	✓	✓	✓	✓			
A MUTTCHANTE		✓	✓	✓	✓	✓			

NOTE IF YOU HAVE MORE THAN 10 OPERATIVES ON SITE, PLEASE USE THE CONTINUATION SHEET

Before starting work, STOP, THINK and CHECK If the answer to any question below is NO, do not start work until the issues are resolved	Yes	No	N/A
1. Method statements, risk assessments and permits			
Have you read and understood the method statement and risk assessment for the task?	✓		
Is everyone on your team briefed on the method statement for the task?	✓		
Have you carried out your weekly toolbox talk? Please give title of toolbox talk:	✓		
Do you have COSHH Assessments and Safety Data Sheets in place for all hazardous substances that will be used?	✓		
Have you carried out Manual Handling Assessments and planned for any deliveries / extraordinary activities?	✓		
2. Place of work			
Are you satisfied that your team has a safe place to work?	✓		
Have you checked access equipment has been inspected as required and certification issued? E.g. Podium steps, scaffold towers	✓		
Are other contractors working adjacent to you aware of what you are doing today? Are you aware of what they will be doing?	✓		
Are third parties and members of the public securely protected from falling materials?	✓		
Does your team know the safe access and egress routes to their places of work?	✓		
3. Task specific			
Are all necessary tools and equipment on site to carry out your work in a safe / efficient manner?	✓		
Are you confident there are no health and safety risks in your work task(s)?	✓		
Are you certain that the operatives you are putting to work are competent for their assigned tasks?	✓		
Are the team equipped with the correct PPE to carry out the task?	✓		
4. Variations			
Have the team members changed? (If yes revise)			✓
Has the task or working environment changed significantly to require a risk assessment and method statement (If yes, work to stop and new method statement to be produced)			✓