

## TRAINING AND DEVELOPMENT PLAN SHORT TRAINING SESSION ATTENDANCE SHEET

Title: Stress	Date: 15,11,19
Location: PLUMSTEAD LIBRARY	Start Time: (0:30
Duration (Minutes) 30min.	End Time: U:00
Presenters name: A. Kulsinskas	Presenters Signature:
17.51.00	

	Candidate's Name	Name of Employer	Candidate's Signature
1	R. RAMA.	RCL	I confirm that I have understood the Tool Box Talk
	R. RAMA.	R.C.L	I confirm that I have a liderstood the Tool Box Talk
3	A. LIDZIU3	R.C.L	I confirm that have understood the Tool Box Talk
4	I SAHOTA	RCL	I confirm that I have understood the Tool Box Talk
5	Raj canacrai	R.C.L	I confirm that I have understood the Tool Box Talk
6	N-R-PAR	R-CC	I confirm that I have understood the Tool Box Talk
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## Grant Claim information

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	No. Attended	Duration	Total Time	Employer Reference
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## TRAINING AND DEVELOPMENT PLAN SHORT TRAINING SESSION ATTENDANCE SHEET

Title: COSH	Date: 12-11-19
Location: SEBASTIAN STREET	Start Time: 1500
Duration (Minutes) 30	End Time: 14 30
Presenters name: K.KULS INS KAS	Presenters Signature:

	Candidate's Name	Name of Employer	Candidate's Signature
1	Candidate 3 Warne		
	David Hennissy	RCL	I confirm that I have understood the fool Box Talk
-	Tames Kenniel.	RCC	I confirm that I have understood the Tool Box Talk
3	Lames Kenniel.	1666	Confirm that I have understood the Tool Box Talk
	L'alley.	16 6 6	I confirm that I have understood the Tool Box Talk
4	A. Patal	ACC.	I confirm that have understood the Tool Box Talk
5	H MANICAL	P.C.L.	I confirm that I have understood the Tool Box Talk
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## **Grant Claim Information**

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KAFFAEL



## Toolbox Talk No. 13 COSHH - CONTROL OF SUBSTANCES HAZARDOUS TO HEALTH

Fact: Ignore the substance today and face the consequences tomorrow!

## Risk Assessment

- 1. Management must carry out a risk (COSHH) assessment to find out whether:
- Exposure to a substance can be eliminated?
- Alternative work methods can reduce exposure? E.g. where possible use a safer method of application, e.g. brush paint instead of spraying, or wet cut concrete sawing to reduce dust.
- A less hazardous substance can be used? E.g. where possible use a safe product e.g. water based paint instead of solvent based.
- 2. The risk assessment must be brought to your attention.
- 3. Any substance with a hazard-warning label has the potential to cause harm read it and take action.
- Q: Before using a substance, what should you consider?

### Hazards

- 1. How you could be affected by a hazardous substance:
- Ingestion eating contaminated food or with contaminated hands
- Inhalation breathing harmful dust or fumes
- Injection chemicals entering through cuts or the skin
- Absorption chemicals entering through the skin

## 2. Examples of hazardous substances on construction sites:

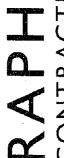
- Wood dusts softwood, hardwood, MDF
- Contaminated ground
- Solvent fumes e.g. from thinners, paints, varnishes or adhesives can cause dermatitis (skin contact) and respiratory problems (inhalation)
- Epoxy-based paints
- Concrete ad-mixtures
- Hard wood dust can cause nasal cancer
- Welding fumes
- Cement wet burns, lung disease (from dust)
- Resins
- Asbestos
- 3. Don't mix chemicals or substances. Eg Two products mixed may give off toxic/irritant fumes, e.g. some types of toilet cleaners mixed with bleach.
- 4. Biological agents may also harm you i.e. Weil's Disease caught from water contaminated by rat's urine.
- Q: Name the three ways a substance can enter the body

## **Control Measures**

- 1. When using hazardous substances, wear the correct PPE.
- Know how to look after and use PPE correctly.
- 3. Know where washing and first aid facilities are on site cover that cut!

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Contract:	Sebastian Street	Site Manager:	Kes Kulsinskas	Date (w/c):	11-11-19	Method statement (s) (Title, Rev No. & Rev date)	001
Location and description of works:	iption of works:						
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Wednesday	(3)	13-11-19	Kes	Kes Kulsinskas	7		
Thursday	1	14-11-19	Kes	Kes Kulsinskas	K	The state of the s	
Friday	5.	5-11-17	Kes	Kes Kulsinskas		The state of the s	
Saturday							
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## RAPHAEL CONTRACTING LTD

# PERSONAL PROTECTIVE EQUIPMENT ISSUE REGISTER

## SITE: SEBASTIAN STREET

	DATE	17-9-19	17-9-19	30/9/19	39/19	30/04/10	17/10/17	25/10/19	30/0/19			
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	OPERATIVE NAME	C.NEON	K. KULSINSBAS	Aminoch Potol	14. MAWILAL	Joseph Smith	K. KULSINSKAD	K. ONALEY	0 -E 0108557			

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## **METHOD STATEMENT INDUCTION**

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

CONTRACT:	MS REF:	001	

	NAME (PRINT)	DATE ATTENDED	SIGNATURE	COMMENTS
1	K.KULSINSKAS	9-9-19	du	I confirm that I have read and understood the Risk Assessment and Method Statement
2	C. NEME	17/9/19	A	I confirm that I have read and understood the Risk Assessment and Method Statement
3	Joseph Smith	30/09/19	J.Smiras	I confirm that I have read and understood the Risk Assessment and Method Statement
4	Aminesh Patel	30/09/19	Rated	I confirm that I have read and understood the Risk Assessment and Method Statement
5	HIMPINIAL	30/09/19	L	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
1 0				I confirm that I have read and understood the Risk Assessment and Method Statement

Signed: A

Position: SUPERVISOR

Print Name: K.KULS INSKAS

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)

1	• • • • • • • • • • • • • • • • • • • •						· · · · · · · · · · · · · · · · · · ·
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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?	۷	
Have you carried out your weekly toolbox	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	
talk? Please give title of toolbox talk:	٠ ک د	
Do you have COSHH Assessments and Safety Data Sheets in place for all hazardous substances that will be used?	<u>`</u>	
Have you carried out Manual Handling Assessments and planned for any deliveries / extraordinary activities?	7	
2. Place of work		
Are you satisfied that your team has a safe place to work?	7	
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?		7
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?	7	
Are you confident there are no health and safety risks in your work task(s)?	7	
Are you certain that the operatives you are putting to work are competent for their assigned tasks?	7	
Are the team equipped with the correct PPE to carry out the task?	7	
4. Variations		
Have the team members changed? (If yes revise)	د	\
Has the task or working environment changed significantly to require a risk assessment and method statement (If we work to cton and new method statement (If we work to cton and new method statement).		7
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nemember, as the supervisor YOU are responsible for the safety of YOUR team		·



## TRAINING AND DEVELOPMENT PLAN SHORT TRAINING SESSION ATTENDANCE SHEET

Title: SCAFFOLDING AND WORK AT HEIGHT (RCL 024)	Date: 14/11/2019
Location: ST PAULS SCHOOL Phase 2	Start Time: 08:00
Duration (Minutes) 30 mins	End Time: 08:30
Presenters name: Jason. Wray	Presenters Signature:
T Tesomoto Trans.	$\mathcal{M}$

Candidate's Name	Name of Candidate's Employer	Candidate's Signature
S. HIRANI	RAPHAEL CONTRACTING LTD	Soften
M . DANDY	RAPHAEL CONTRACTING LTD	elfort
J. DYSON	RAPHAEL CONTRACTING LTD	Den
S. SIMONOVIC	RAPHAEL CONTRACTING LTD	Chumps
P. O'DONOVAN	RAPHAEL CONTRACTING LTD	Poll
J. MUSTICONE	RAPHAEL CONTRACTING LTD	-

## **Grant Claim information**

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

No. Attended 06 Duration 30 mins

Total Time 3 Hours Employer Reference 2453745

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