



# RAPHAEL CONTRACTING LTD

## TRAINING AND DEVELOPMENT PLAN SHORT TRAINING SESSION ATTENDANCE SHEET

Title: SRM – CONTROL MEASURES FOR INTERNAL LIFTS	Date: 13/07/2020
Location: Hilton Hotel, Victoria Square, Woking	Start Time: 07:30
Duration (Minutes) 30 mins	End Time: 08:00
Presenters name: Jason Wray	Presenters Signature:

Candidate's Name	Name of Candidate's Employer	Candidate's Signature
K. KOWALSKI	Raphael Contracting Ltd	 I Confirm that I have understood the Toolbox Talk
M. KOWALSKI	Raphael Contracting Ltd	 I Confirm that I have understood the Toolbox Talk
		I Confirm that I have understood the Toolbox Talk
		I Confirm that I have understood the Toolbox Talk
		I Confirm that I have understood the Toolbox Talk
		I Confirm that I have understood the Toolbox Talk

### Grant Claim information

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

No. Attended 3	Duration 30 mins	Total Time 1 hour	Employer Reference 2453745
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DOCUMENT REFERENCE: DOCUMENT OWNER:	SIT-FM-007 DAS	VERSION NO: 1.0	CREATION DATE: 07/02/2013 LAST REVISION DATE: N/A NEXT REVIEW DATE: 07/02/2014	Page 1 of 1
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In order to reduce overcrowding and ease social distancing in the hotel lift lobbies, we are introducing the following rules as of Monday 13<sup>th</sup>

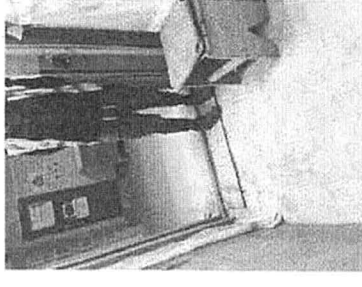
July:

- No material deliveries until 08:30. Passengers only.
- Up until 08:30 – one of the two goods lifts will pick up only from level 1 for NGB operatives only. All others to pick up from Ground floor. This does not apply to lift HPL 5.
- Material deliveries that are expected to require the lift for longer than 30 minutes are to be scheduled for after 15:30. Such deliveries should be agreed in advance with SRM/Clipfine in the 3pm logistics meeting, (and of course booked in via Datascope) where arrangements can be made for Clipfine labour to distribute them to the required level(s) during the night shift where possible.



## Tool Box Talk

### COVID-19 Control measures – internal Lifts.



From Monday 13<sup>th</sup> July 2020:

- Face Masks/Face Shields must be worn by all site personnel when using an internal beneficial lift.
- Face Masks/Face Shields must be worn by the lift operators at all times.
- The lifts are under the control of the lift operators – passengers must not exceed the agreed numbers. (as displayed on the lift)
- Site personnel must respect the social distancing measures and act in a responsible manner when using the lifts and the lift lobby areas
- Any site operative or lift operator found not wearing a Face Mask/Face Shields will be disciplined.
- Any site operative not complying to the VSW COVID-19 controls will be disciplined.
- The social distancing on the VSW project remains at 2metres - wherever possible additional control measures are required where persons are within 2metres of one another.



# RAPHAEL CONTRACTING LTD

## TRAINING AND DEVELOPMENT PLAN SHORT TRAINING SESSION ATTENDANCE SHEET

Title: SRM - WORKSTATIONS	Date: 14/07/2020
Location: Hilton Hotel, Victoria Square, Woking	Start Time: 07:30
Duration (Minutes) 30 mins	End Time: 08:00
Presenters name: Jason Wray	Presenters Signature:

Candidate's Name	Name of Candidate's Employer	Candidate's Signature
J. GODMAN	Raphael Contracting Ltd	 I Confirm that I have understood the Toolbox Talk
K. KOWALSKI	Raphael Contracting Ltd	 I Confirm that I have understood the Toolbox Talk
M. KOWALSKI	Raphael Contracting Ltd	 I Confirm that I have understood the Toolbox Talk
		I Confirm that I have understood the Toolbox Talk
		I Confirm that I have understood the Toolbox Talk
		I Confirm that I have understood the Toolbox Talk

### Grant Claim information

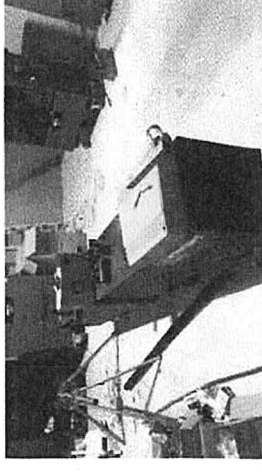
Note: Claims can only be made for your employees or labour-only sub-contractors

No. Attended 3	Duration 30 mins	Total Time 1 ½ hours	Employer Reference 2453745
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DOCUMENT REFERENCE: DOCUMENT OWNER:	SIT-FM-007 DAS	VERSION NO: 1.0	CREATION DATE: LAST REVISION DATE: NEXT REVIEW DATE:	07/02/2013 N/A 07/02/2014	Page 1 of 1
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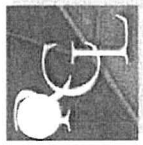
## Tool Box Talk



## Workstations



- Choice of set up location – away from access / egress routes.
- Mobile units where possible to facilitate relocation as works progress on site.
- Cutting platform to remain clean and clear.
- Physical barriers to be installed to create and maintain a safe working area.
- Associated warning signage with contractor details to be displayed.
- Ensure adequate lighting levels are maintained.
- All 110v leads are to be run at high level to avoid trip hazards.
- Good standards of housekeeping to be maintained at all times.
- Correct PPE to be worn.
- Only appropriately trained operatives are permitted to use equipment.
- Daily and weekly checks to be undertaken prior to use.



## PERSONAL PROTECTIVE EQUIPMENT ISSUE REGISTER

SITE: HILTON HOTEL, WOKING

OPERATIVE NAME	HARD HAT	SAFETY GLASSES	HI-VIS VEST	GLOVES	EAR DEFENDER S/ PLUGS	DUST MASK FFP3	REASON FOR ISSUE / REISSUE				SIGNATURE	DATE
							New	Lost	Damaged	Wear and Tear		
M. KOWALSKI				✓		✓				✓	<i>[Signature]</i>	25.06.20
K. KOWALSKI				✓		✓				✓	<i>[Signature]</i>	25.06.20
J. WRAY	(FULL FACE SHIELD FOR HARD HAT)						✓				<i>[Signature]</i>	09/07/20



## METHOD STATEMENT INDUCTION

ATTENDANCE SHEET TO BE COMPLETED FOR ALL METHOD STATEMENT TALKS

(METHOD STATEMENTS ISSUED TO ALL PRESENT)

PAGE - 3

CONTRACT:	Sebastian Street	MS REF:	B
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	NAME (PRINT)	DATE ATTENDED	SIGNATURE	COMMENTS
1	D. RASCICIAI	17.02.2020		I confirm that I have read and understood the Risk Assessment and Method Statement
2	M. KOWALSKI	17.02.2020		I confirm that I have read and understood the Risk Assessment and Method Statement
3	P. O'DOWDAN	17.2.2020		I confirm that I have read and understood the Risk Assessment and Method Statement
4	A. KULSINSKAS	18.02.20		I confirm that I have read and understood the Risk Assessment and Method Statement
5	J. SAMOTA	18/02/20		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: 17-02-20

### 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)





# RAPHAEL

## CONTRACTING LTD

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

CONTRACT:

	NAME (PRINT)	DATE ATTENDED	SIGNATURE	COMMENTS/ITEM
1	A. Kulsinskis	8-4-20		
2	K. KULSINSKAS	-11-		
3	S. SIMONOVIC	-11-		
4	T. DOMANSKI	8-4-20		
5	S. HIRANI	18-05-20	S. HIRANI	
6	R. RAMA	8-06-20		
7	H. MANIVILAK	16-06-20		
8				
9				
10				
11				
12				
13				
14				
15				

Talk No.

Title: RAMS REVIEW (TEMP COVID-19 APPENDUM)

Signed:

Position: SUPERVISOR

Print Name: K. KULSINSKAS

Date: 8-4-20

**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)

DOCUMENT REFERENCE:	SIT-FM-004	VERSION NO:	1.0	CREATION DATE:	07/02/2013	
DOCUMENT OWNER:	DAS			LAST REVISION DATE:	N/A	Page 1 of 1
				NEXT REVIEW DATE:	07/02/2014	





**RAPHAEL**  
CONTRACTING LTD

## PERSONAL PROTECTIVE EQUIPMENT ISSUE REGISTER

SITE: SEBASTIAN STREET

OPERATIVE NAME	HARD HAT	SAFETY GLASSES	HI-VIS VEST	GLOVES	EAR DEFENDER S/ PLUGS	DUST MASK FFP3	REASON FOR ISSUE / REISSUE				SIGNATURE	DATE
							New	Lost	Damaged	Wear and Tear		
K. KULSINSKAS				✓						✓	<i>[Signature]</i>	02-03-20
H. MANILAL				✓	✓	✓				✓	<i>[Signature]</i>	03-3-2020
N. R. PATIL				✓		✓					<i>[Signature]</i>	12-3-20
S. SIMONOVIC				✓		✓					<i>[Signature]</i>	13-3-20
D. Dhanraj				✓		✓					<i>[Signature]</i>	17-3-20
K. KULSINSKAS			✓	✓		✓				✓	<i>[Signature]</i>	15-4-20
I. DOMANSKI						✓				✓	<i>[Signature]</i>	16-4-20
S. SIMONOVIC						✓				✓	<i>[Signature]</i>	20-4-20
A. KULSINSKAS						✓				✓	<i>[Signature]</i>	20-4-20
R. RAMA			✓	✓	✓	✓					<i>[Signature]</i>	8-6-20
S. SIMONOVIC				✓		✓					<i>[Signature]</i>	10-6-20
H. MANILAL				✓		✓					<i>[Signature]</i>	24-6-20

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DOCUMENT REFERENCE: DOCUMENT OWNER:	SIT-FM-008 DAS	VERSION NO: 1.3	CREATION DATE: LAST REVISION DATE:	07/02/2013 22/11/2018	Page 1 of 1
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## METHOD STATEMENT INDUCTION

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

PAGE - 2

CONTRACT:	Sebastian Street	MS REF:	B
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	NAME (PRINT)	DATE ATTENDED	SIGNATURE	COMMENTS
1	H. GORASIA	7/2/20		I confirm that I have read and understood the Risk Assessment and Method Statement
2	R. PAMA.	7/2/20		I confirm that I have read and understood the Risk Assessment and Method Statement
3	S. MIRANI	7/2/20		I confirm that I have read and understood the Risk Assessment and Method Statement
4	X. R. PATIL	10/2/20		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: 07/02/2020

**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)



## METHOD STATEMENT INDUCTION

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

PAGE - 1

CONTRACT:	Sebastian Street	MS REF:	B
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	NAME (PRINT)	DATE ATTENDED	SIGNATURE	COMMENTS
1	K. O'Malley	15/01/20		I confirm that I have read and understood the Risk Assessment and Method Statement
2	D. Mennerby	15/01/20		I confirm that I have read and understood the Risk Assessment and Method Statement
3	R. R. MUI	15/01/20		I confirm that I have read and understood the Risk Assessment and Method Statement
4	A. Patel	15/01/20		I confirm that I have read and understood the Risk Assessment and Method Statement
5	Joseph Smith	15/01/20		I confirm that I have read and understood the Risk Assessment and Method Statement
6	H. MANILAL	15/01/20		I confirm that I have read and understood the Risk Assessment and Method Statement
7	D. Conyers	27/01/20		I confirm that I have read and understood the Risk Assessment and Method Statement
8	BERNARDOS	28/01/20		I confirm that I have read and understood the Risk Assessment and Method Statement
9	D. Mennerby	28/01/20		I confirm that I have read and understood the Risk Assessment and Method Statement
10	T. DOMANIS	03/02/20		I confirm that I have read and understood the Risk Assessment and Method Statement

Signed:

Position: Supervisor

Print Name: K/.Kulsinskas

Date: 15-01-2020

### 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)



### Toolbox Talk No. 33 WOODWORKING MACHINES

The most common woodworking machines used on site – portable bench saws and hand held electric planes, electric routers, circular saws, jig saws, chop saws, drills, chain morticer, paslode gun and compressed air nail guns.

- Ensure that all equipment is inspected and any faults found are reported, also ensure the equipment is cleaned regularly.
- Make sure you have received adequate training if using any wood working machinery as failure to follow this advice could lead to death or serious injury.
- Bench circular saws, planing machines and vertical spindle moulding machine have long been recognised as the main source of woodworking machine accidents.

#### Remember the following control measures:

1. No person should use any woodworking machine unless trained to do so.
2. No person under 18 years of age may operate woodworking equipment unless approved training has been completed or being adequately supervised by an experienced person.
3. Ensure there is sufficient clear and unobstructed space around the machine.
4. Ensure work area is tidy and kept clear of sawdust or offcuts
5. Inspect equipment for faults/damage before use.
6. Use only approved equipment if competent in their use and ensure familiarity with machinery and electrical isolation controls.
7. Where necessary use a dust mask to prevent inhalation of dust.
8. Warning signs must be displayed if appropriate.
9. Use hearing protection if noise levels excessive and advise others to wear hearing protection.
10. Ensure that appropriate guards are in place and adjusted correctly for the work to hand.
11. Hold material flat on table against fence.
12. Use push sticks of suitable length and always use a push-stick when using a circular saw.
13. Ensure that all emergency stop controls or mechanisms are in place and working correctly.
14. Ensure there is adequate lighting.
15. Ensure blades and cutters are sharp and free from defects.
16. Ensure riving knife and guard is always in position before use.
17. Do not force material through the machine.
18. Do not use electrical machines in wet or damp conditions.
19. Do not make adjustments with the machine running.
20. Ensure material is well supported before using ripsnorter.
21. Operators should not wear any items of loose clothing which could become caught in moving parts of power tools.
22. Report any defect to your supervisor – do not use defective equipment.

#### On completion

1. Switch off machine immediately after use. All tools which have exposed cutters should be switched off and held until they have stopped moving before being set down.
2. Switch off extraction system.
3. Tidy up. Clean work area, machinery and equipment used. Use vacuum cleaner where necessary. Do not sweep.

DOCUMENT REFERENCE:	TOOLBOX TALKS	VERSION NO:	9	CREATION DATE:	11/08/2010	Page 48 of 141
DOCUMENT OWNER:	MOB			LAST REVISION DATE:	21/10/2019	



## TRAINING AND DEVELOPMENT PLAN SHORT TRAINING SESSION ATTENDANCE SHEET

Title:	Woodworking machines	Date:	17-07-2020
Location:	SEBASTIAN STREET	Start Time:	7:30
Duration (Minutes)	30min	End Time:	8:00
Presenters name:	D.Sanders	Presenters Signature:	

	Candidate's Name	Name of Employer	Candidate's Signature
1	T.Damanski	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	R.Ramgi	RCL	 I confirm that I have understood the Tool Box Talk
4	H.Manilal	RCL	 I confirm that I have understood the Tool Box Talk
5	K.Kulsinskas	RCL	 I confirm that I have understood the Tool Box Talk
6	R.Bernardo	RCL	 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

### Grant Claim information

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

No. Attended	Duration	Total Time	Employer Reference
			2453745

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
<b>1. Method statements, risk assessments and permits</b>				
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?		✓		
<b>2. Place of work</b>				
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?		✓		
<b>3. Task specific</b>				
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?		✓		
<b>4. Variations</b>				
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				








## Site Manager's Daily Safe Start

Contract:	Sebastian Street	Site Manager:	D.Sanders	Date (w/c):	13-07-2020	Method statement (s) (Title, Rev No. & Rev date)	B
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Location and description of works: Fitting BCL panels, skirting boards, architraves & window boards ground floor, snagging all floors.

## Site Manager's Daily Sign Off

	Date	Name	Signature	Hot Topics of the Day (the main points you discussed)
Monday	13-07-20	D.Sanders		PPE
Tuesday	14-07-20	D.Sanders		Keeping 2m distance
Wednesday	15-07-20	K.Kulsinskas		Dust & masks
Thursday	16-07-20	K.Kulsinskas		Locking site boxes
Friday	17-07-20	D.Sanders		Fire exits
Saturday				
Sunday				

## Operatives Daily Sign Off

[illegible]

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