



RAPHAEL

CONTRACTING LTD

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		
I. Todorov	✓	✓		✓		✓	✓				<i>I. Todorov</i>	21/09/20
N. Kovachev						✓	✓				<i>N. Kovachev</i>	21/09/20
J. SMITH		✓					✓				<i>J. Smith</i>	29/09/20
E. AMANINS		✓					✓				<i>E. Amanins</i>	29/09/20
Robert Dick	✓		✓				✓				<i>Robert Dick</i>	2.10.20
H. MARILOVA				✓			✓				<i>H. Mariлова</i>	5/10/20
R. Cernakova	✓	✓	✓	✓		✓	✓				<i>R. Cernakova</i>	5/10/20
R. DICK						✓	✓				<i>R. Dick</i>	06/10/20
J. SMITH		✓						✓			<i>J. Smith</i>	19/10/20
ROBERT DICK						✓			✓		<i>Robert Dick</i>	30/10/20
R. CANUCCI				✓				✓			<i>R. Canucci</i>	02/11/20
R. DICK				✓						✓	<i>R. Dick</i>	04/11/20
T. FLINNIS		✓						✓			<i>T. Flinnis</i>	06/11/20



RAPHAEL CONTRACTING LTD

TRAINING AND DEVELOPMENT PLAN SHORT TRAINING SESSION ATTENDANCE SHEET

Title: <u>WASTE SEGREGATION.</u>	Date: <u>03-11-20</u>
Location: <u>Knightsbridge</u>	Start Time: <u>11.00</u>
Duration (Minutes) <u>30min</u>	End Time: <u>11.30</u>
Presenters name: <u>G.Buck</u>	Presenters Signature: <u>[Signature]</u>

	Candidate's Name	Name of Employer	Candidate's Signature
1	<u>V. BALIULEVICIUS</u>	<u>RAPHAEL</u>	I confirm that I have understood the Tool Box Talk
2	<u>K. O'Malley</u>	<u>RCL</u>	I confirm that I have understood the Tool Box Talk
3	<u>A. Kulsinskas</u>	<u>RCL</u>	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 <u>2453745</u>
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DOCUMENT REFERENCE: DOCUMENT OWNER:	SIT-FM-007 DAS	VERSION NO: 1.1	CREATION DATE: LAST REVISION DATE:	07/02/2013 01/03/2018	Page 1 of 1
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RAPHAEL CONTRACTING LTD

TRAINING AND DEVELOPMENT PLAN SHORT TRAINING SESSION ATTENDANCE SHEET

Title: HOW TO MANAGE PERSONS WITH SYMPTOMS OR A POSITIVE TEST FOR COVID-19 CORONAVIRUS	Date: 03/11/2020
Location: Hilton Hotel, Victoria Square, Woking	Start Time: 10:30
Duration (Minutes) 30 mins	End Time: 11:00
Presenters name: Jason Wray	Presenters Signature:

Candidate's Name	Name of Candidate's Employer	Candidate's Signature
I. KOVACH	Raphael Contracting Ltd	 I Confirm that I have understood the Toolbox Talk
K. KULSINSKAS	Raphael Contracting Ltd	 I Confirm that I have understood the Toolbox Talk
E. AMANING	Raphael Contracting Ltd	 I Confirm that I have understood the Toolbox Talk
J. SMITH	Raphael Contracting Ltd	 I Confirm that I have understood the Toolbox Talk
R. CANCRAI	Raphael Contracting Ltd	 I Confirm that I have understood the Toolbox Talk
H. MANILAL	Raphael Contracting Ltd	 I Confirm that I have understood the Toolbox Talk
A. LIDZIUS	Raphael Contracting Ltd	 I Confirm that I have understood the Toolbox Talk
R. DICK	Raphael Contracting Ltd / Rec Serv Ltd	 I Confirm that I have understood the Toolbox Talk
I.E. DARESCU	Raphael Contracting Ltd / Rec Serv Ltd	 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 9	Duration 30 mins	Total Time 4 1/2 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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How to Manage Persons with 'Symptoms' or a 'Positive Test' for COVID-19 Coronavirus

If any member(s) of your workforce....

- Tests Positive for COVID-19
- Displays Symptoms of COVID-19
- Is requested to isolate by NHS Test and Trace
- Lives in the same household as somebody who displays symptoms or has tested positive



Do not immediately send your entire workforce home as a precaution



Do not request any member (s) of your workforce to obtain a Covid-19 test when they do not display symptoms

Close contacts are defined as:

- People who spend significant time in the same household as a person who has tested positive for COVID-19.
- A person who has had face-to-face contact (within one metre), with someone who has tested positive for COVID-19, including:
 - o being coughed on,
 - o having a face-to-face conversation within one metre
 - o having skin-to-skin physical contact, or
 - o contact within one metre for one minute or longer without face-to-face contact
- A person who has been within 2 metres of someone who has tested positive for COVID-19 for more than 15 minutes.
- A person who has travelled in a small vehicle with someone who has tested positive for COVID-19 or in a large vehicle near someone who has tested positive for COVID-19.

Where an interaction between 2 people has taken place through a Perspex (or equivalent) screen, this would not be considered sufficient contact, provided that there has been no other contact such as any of those indicated above.

Follow the guidance below for the correct course of action ↓

