RAPHAEL CONTRACTING LTD

PERSONAL PROTECTIVE EQUIPMENT ISSUE REGISTER

SITE: 57 CAMPDEN HILL ROAD

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		
K.KULSINSKAS		V							V			20/02/23
V.BALIULEVICIUS		V	V	V						V		20/02/23

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RAPHAEL CONTRACTING LTD

METHOD STATEMENT INDUCTION

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

CONTRACT:	57 Campden Hill Road	MS REF:	

	NAME (PRINT)	DATE ATTENDED	SIGNATURE	COMMENTS
1	KESTUTIS KULSINSKAS	20/02/23		I confirm that I have read and understood the Risk Assessment and Method Statement
2	VIRGINIJUS BALIULEVICIUS	20/02/23		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: SITE MANAGER

Print Name: K. KULSINSKAS Date: 20/02/23

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

Site Manager's Daily Safe Start

Contract:	57 Campden Hill	Site Manager:	Paul Haugh	Date (w/c):	20/02/23	Method statement (s) (Title, Rev No. & Rev date)	001

Location and description of works: FITTING SLIDING DOOR SETS L-2, L-1 AND BASMENT.

Site Manager's Daily Sign Off

	Date	Name	Signature	Hot Topics of the Day *(the main points you discussed)*
Monday	20/02/23	K.KULSINSKAS		SITE INDUCTION
Tuesday	21/02/23	K.KULSINSKAS		OPENINGS AND EDGES
Wednesday	22/02/23	K.KULSINSKAS		SLIPS, TRIPS AND FALLS
Thursday	23/02/23	K.KULSINSKAS		HOUSE KEEPING
Friday	24/02/23	K.KULSINSKAS		NEW SITE ROUTES
Saturday				
Sunday				

Operatives Daily Sign Off

Name	Signature	M	T	W	T	F	S	S	Comments
V.BALIULEVICIUS		✓	✓	✓	✓	✓	X	X	
K.KULSINSKAS		✓	✓	✓	✓	✓	X	X	

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)		✓	
Remember, as the supervisor YOU are responsible for the safety of YOUR team			

RAPHAEL CONTRACTING LTD

TRAINING AND DEVELOPMENT PLAN

SHORT TRAINING SESSION ATTENDANCE SHEET

Title: MANUAL HANDLING	Date: 20/02/23
Location: 57 Campden Hill Road	Start Time: 730
Duration (Minutes) 30	End Time: 800
Presenters name: K.KULSINSKAS	Presenters Signature:

	Candidate's Name	Name of Employer	Candidate's Signature
1	V.BALIULEVICIUS	RAPHAEL	I confirm that I have understood the Tool Box Talk
2	K.KULSINSKAS	RCL	I confirm that I have understood the Tool Box Talk
3			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 2453745

RAPHAEL CONTRACTING LTD

PERSONAL PROTECTIVE EQUIPMENT ISSUE REGISTER

SITE: 21 MOORFIELDS

OPERATIVE NAME	HARD HAT CHIN STRAP	SAFETY GLASSES	HI-VIZ VEST	GLOVES	EAR DEFENDERS / PLUGS	DUST MASK FFP3	REASON FOR ISSUE / REISSUE				SIGNATURE	DATE
							New	Lost	Damaged	Wear and Tear		
S.GEDGAUTAS	✓		✓							✓		21/11/22
K.OMALLEY								✓				21/11/22
S.VILKOU	✓									✓		21/11/22
D.BARR	✓		✓	✓			✓					22/11/22
S.GAJJAR	✓		✓							✓		22/11/22
K.KULSINSKAS				✓						✓		12/12/22
V.BALIULEVICIUS		✓		✓						✓		20/12/22
Joseph Smith				✓				✓		✓		04/01/22
E.AMANING		✓		✓						✓		13/01/22
B.RAMCHANDG		✓		✓					✓	·		20/01/22

RAPHAEL CONTRACTING LTD

RCL TRAINING AND DEVELOPMENT PLAN
SHORT TRAINING SESSION ATTENDANCE SHEET

Title: (RCL 60) – LIFTING EQUIPMENT & OPERATIONS	**Date: 21/02/2023**
Location: 21 MOORFIELDS	**Start Time: 07:30**
Duration (Minutes) 30 mins	**End Time: 08:00**
Presenter's name: Jason Wray	**Presenters Signature:**

Candidate's Name	Name of Candidate's Employer	Candidate's Signature
D. SANDERS	RAPHAEL CONTRACTING LTD	I Confirm that I have understood the Toolbox Talk
A. KULSINSKAS	RAPHAEL CONTRACTING LTD	I Confirm that I have understood the Toolbox Talk
S. SIMONOVIC	RAPHAEL CONTRACTING LTD	I Confirm that I have understood the Toolbox Talk
D. BARR	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
B. RAMCHANDE	RAPHAEL CONTRACTING LTD	I Confirm that I have understood the Toolbox Talk
E. CHIRLOV	RAPHAEL CONTRACTING LTD / APPEX	I Confirm that I have understood the Toolbox Talk
P. DOBIC	RAPHAEL CONTRACTING LTD / APPEX	I Confirm that I have understood the Toolbox Talk
C. HART	RCL / STAFFORD BRIDGE / 247 NATIONAL	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	Duration	Total Time	Employer Reference
9	30 mins	4 ½ hours	2453745

Toolbox Talk No. 60 LIFTING EQUIPMENT AND OPERATIONS

IDENTIFICATION

- Lifting equipment includes items of plant (such as fork-lift trucks and telescopic handlers), all mobile elevating work platforms as well as cranes, electric hoists, goods hoists, gin wheels etc.

GENERAL PRECAUTIONS

- Risk assessments must be prepared for all lifting operations
- All lifting equipment must be marked with its safe working load (SWL)
- Lifting equipment must not be used to move loads heavier than the SWL
- Lifting equipment must only be used by people who have been trained to do so
- Never stand under any suspended load
- Look for overhead obstructions such as power cables
- Ensure that lifting equipment has no obvious defects before using it

FORK-LIFT TRUCKS AND TELESCOPIC HANDLERS

- Travel with load in lowest position and don't raise it whilst travelling
- Ensure the load is stable and secure
- Do not carry passengers unless a passenger seat is fitted
- Do not use to lift people unless suitably adapted

CRANES

- Use cranes to list and lower loads vertically, don't drag loads
- At least one trained signaller (banksman) must supervise lifting operations
- It may be necessary to attach tag lines to the load to stabilise it when being lifted
- Beware of changing weather conditions or wind speed making lifting operations unsafe

MOBILE ELEVATING WORK PLATFORMS

- Use only on firm, level ground
- Use outriggers or stabilisers where necessary
- Except for scissor lifts, users should wear a safety harness clipped to machine

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RCL TRAINING AND DEVELOPMENT PLAN
SHORT TRAINING SESSION ATTENDANCE SHEET

Title: (RCL 20) – HAND PROTECTION	**Date: 24/02/2023**
Location: 21 MOORFIELDS	**Start Time: 07:30**
Duration (Minutes) 30 mins	**End Time: 08:00**
Presenter's name: Jason Wray	**Presenters Signature:**

Candidate's Name	Name of Candidate's Employer	Candidate's Signature
D. SANDERS	RAPHAEL CONTRACTING LTD	I Confirm that I have understood the Toolbox Talk
A. KULSINSKAS	RAPHAEL CONTRACTING LTD	I Confirm that I have understood the Toolbox Talk
S. SIMONOVIC	RAPHAEL CONTRACTING LTD	I Confirm that I have understood the Toolbox Talk
D. BARR	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
B. RAMCHANDE	RAPHAEL CONTRACTING LTD	I Confirm that I have understood the Toolbox Talk
E. CHIRLOV	RAPHAEL CONTRACTING LTD / APPEX	I Confirm that I have understood the Toolbox Talk
P. DOBIC	RAPHAEL CONTRACTING LTD / APPEX	I Confirm that I have understood the Toolbox Talk
C. HART	RCL / STAFFORD BRIDGE / 247 NATIONAL	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	Duration	Total Time	Employer Reference
9	30 mins	4 ½ hours	2453745