
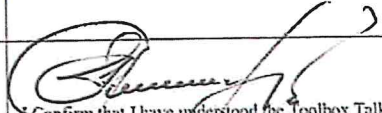

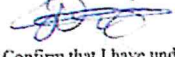






RAPT

RCL TRAINING AND DEVELOPMENT PLAN SHORT TRAINING SESSION ATTENDANCE SHEET

Title: First Aid and Accident Reporting	Date: 17/10/2023
Location: 84 MOORGATE	Start Time: 07:30
Duration (Minutes) 30 mins	End Time: 08:00
Presenter's name: D SANDERS	Presenters Signature: 

Candidate's Name	Name of Candidate's Employer	Candidate's Signature
S SIMONOVIC	RAPHAEL CONTRACTING LTD	 I Confirm that I have understood the Toolbox Talk
R CANACRAI	RAPHAEL CONTRACTING LTD	 I Confirm that I have understood the Toolbox Talk
I DRAGUS	RAPHAEL CONTRACTING LTD	 I Confirm that I have understood the Toolbox Talk
I SAHOTA	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
	RAPHAEL CONTRACTING LTD	I Confirm that I have understood the Toolbox Talk
	RAPHAEL CONTRACTING LTD	I Confirm that I have understood the Toolbox Talk
	RAPHAEL CONTRACTING 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 10	Duration 30 mins	Total Time 5 hours	Employer Reference 2453745
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Toolbox Talk No. 9 FIRST AID AND ACCIDENT REPORTING

Fact: If you know basic first aid, you could save a life.

Before First Aid is Required

1. Ensure you know where first aid equipment is kept.
2. Know whom the first-aider(s) and appointed person(s) are.
3. If you use anything from the first aid box, make sure it's replaced.
4. Keep a small first aid kit with you if you are working away from the main site.
5. Know where the phone is and understand the procedure for calling the emergency services.

Q: What are the procedures here?

When First Aid is Required

1. Make the casualty safe.
2. Call for help i.e. first aider.
3. Send someone to phone for an ambulance, if required.
4. Don't move the casualty, unless they are in immediate danger.

Q: On finding a casualty, what is the first thing to do?

5. Remain with the casualty and give reassurance.
6. Make the casualty as comfortable as possible.
7. Don't give drinks or food to a casualty; moisten lips only.
8. Don't allow the casualty to smoke.

Q: What would you do until a first aider arrived?

Basic First Aid May Save a Life

1. Do you know how to resuscitate and start the heart?
2. Do you know how to stop major bleeding?
3. Do you know how to treat scolds, burns and for shock?

If you don't, think about getting first aid training.

Accident Reporting

1. Report all accidents and dangerous occurrences.
2. Ensure that the details are entered into the accident book.

Q: Following an accident at work what must you do?

Q: What should you know before an emergency arises?

Q: What are the priorities of first aid?

Other Considerations

1. First aid cover must include shift work
2. Someone must have responsibility for re-stocking first aid boxes
3. The first aid equipment provided must be appropriate for the nature of the work and the number of operatives
4. First aiders should be easy to identify – usually a sticker on the safety helmet

REMEMBER: If you know first aid, you could save a life!

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DOCUMENT OWNER:	MOB			LAST REVISION DATE:	Oct-2021	



RAPT

RCL TRAINING AND DEVELOPMENT PLAN SHORT TRAINING SESSION ATTENDANCE SHEET

Title: Hand Arm Vibration	Date: 19/10/2023
Location: 84 MOORGATE	Start Time: 07:30
Duration (Minutes) 30 mins	End Time: 08:00
Presenter's name: D SANDERS	Presenters Signature:

Candidate's Name	Name of Candidate's Employer	Candidate's Signature
S SIMONOVIC	RAPHAEL CONTRACTING LTD	 I Confirm that I have understood the Toolbox Talk
R CANACRAI	RAPHAEL CONTRACTING LTD	 I Confirm that I have understood the Toolbox Talk
I DRAGUS	RAPHAEL CONTRACTING LTD	 I Confirm that I have understood the Toolbox Talk
I SAHOTA	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
	RAPHAEL CONTRACTING LTD	I Confirm that I have understood the Toolbox Talk
	RAPHAEL CONTRACTING 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 10	Duration 30 mins	Total Time 5 hours	Employer Reference 2453745
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Toolbox Talk No. 41 HAND ARM VIBRATION (HAV)

Fact: Regular exposure to vibration can cause a range of permanent injuries to your hands and arms.

WHAT IS HAV?

1. HAV stands for Hand-Arm Vibration.
2. HAV reaches your hands when:
 - working with hand-held power tools, or
 - hand-guided machinery, or
 - holding materials processed by machinery

Q: What does HAV stand for?

Q: How can you get HAV?

THE SOURCES OF VIBRATION

- A common cause of hand-arm vibration is the prolonged use of rotating hand tools used for cutting and gripping
- Percussive hand tools used for riveting, chipping, hammering, drilling etc. are also sources of vibration
- The use of chainsaws is also another source of hand-arm vibration

EFFECTS OF VIBRATION

Depending upon the work situation, vibration can affect the whole body or, more commonly, just the hands and arms, usually called 'hand-arm vibration'.

- The first signs of a problem may only be tingling in the affected fingers
- Exposure to vibration can lead to irritation, fatigue and loss of concentration
- The above effects are likely to affect a person's attention to safety and therefore increase the likelihood of an accident occurring
- In the longer term, damage may occur to blood vessels, nerves, muscles, tendons and body organs
- Excessive hand-arm vibration can lead to 'Vibration White Finger' resulting in damaged blood vessels, circulatory problems, pain and possibly gangrene

Health effects

1. Regular exposure can cause a range of permanent injuries to your hands and arms.
2. Known as hand-arm vibration syndrome (HAVS)
3. The injuries you could suffer include damage to your:
 - blood circulatory system (Vibration White Finger (VWF))
 - sensory nerves
 - muscles, bones, joints

Symptoms

Vibration White Finger






1. Usually set off when your hands or body get cold or wet
2. The first sign is when your fingertips become white
3. Your fingers may also become numb
4. You may get 'pins and needles'

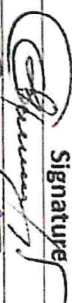





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DOCUMENT OWNER:	MOB			LAST REVISION DATE:	Oct-2021	

Site Manager's Daily Safe Start

Contract:	84 MOORGATE	Contracts Manager Site Manager	Paul Haugh Dave Sanders	Date (w/c):	16/10/2023	Method statement (s) (Title, Rev No. & Rev date)	RCL 84M-RCL-22-ZZ-MS-A-00001 rev C01
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Location and description of work: Installing temporary door sets and window boards

Site Manager's Daily Sign Off									
	Date	Name	Signature	Hot Topics of the Day (the main points you discussed)					
Monday	16/10/2023	D Sanders		Fire Precautions and equipment First Aid and accident reporting Ladder Safety					
Tuesday	17/10/2023	D Sanders							
Wednesday	18/10/2023	D Sanders							
Thursday	19/10/2023	D Sanders		Hand Arm Vibration Hazardous waste					
Friday	20/10/2023	D Sanders							
Saturday	21/10/2023	N/A							
Sunday	22/10/2023	N/A		N/A					

Operatives Daily Sign Off									
Name	Signature	M	T	W	T	F	S	S	Comments
S Simorwic		✓	✓	✓	✓	✓	✓	✓	RCL MANGER/CARPENTER
I Sahota		✓	✓	✓	✓	✓	✓	✓	RCL CARPENTER
Rajesh Canacrai		✓	✓	✓	✓	✓	✓	✓	RCL CARPENTER
B Ramchande		X	X	X	X	X	X	X	RCL LABOURER
J Smith		✓	✓	✓	✓	✓	✓	✓	RCL CARPENTER
I Dragus		✓	✓	✓	✓	✓	✓	✓	RCL CARPENTER

NOTE IF YOU HAVE MORE THAN 10 OPERATIVES ON SITE, PLEASE USE THE CONTINUATION SHEET556

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?			✓		
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					



PERSONAL PROTECTIVE EQUIPMENT ISSUE REGISTER

SITE: 57 CAMPDEN HILL ROAD

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. O'Malley				✓		✓				✓		15/09/23
A. Lidzins		✓				✓				✓		15/09/23
A. Kulsinskas		✓				✓				✓		19/09/23
V. BALIULEVICIUS				✓		✓				✓		21/09/23
D. MARCINIUKAITIS	✓	✓	✓	✓			✓					02/10/23
V. GOSTARINIS	✓	✓	✓	✓								02/10/23
A. MAKARAVIČAS	✓	✓	✓	✓		✓						03/10/23
B. RAMCHINDAS				✓		✓						05/10/23



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:	002
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	NAME (PRINT)	DATE ATTENDED	SIGNATURE	COMMENTS
1	KESTUTIS KULSINSKAS	01/08/23		I confirm that I have read and understood the Risk Assessment and Method Statement
2	Kieran O'Malley	01/08/23		I confirm that I have read and understood the Risk Assessment and Method Statement
3	A. Kulsinskas	7/8/23		I confirm that I have read and understood the Risk Assessment and Method Statement
4	E. Amanius	7/8/23		I confirm that I have read and understood the Risk Assessment and Method Statement
5	B. Ramchande	7/8/23		I confirm that I have read and understood the Risk Assessment and Method Statement
6	V. BALIULEVICIUS	14/8/23		I confirm that I have read and understood the Risk Assessment and Method Statement
7	A. LIDZIUS	13/9/23		I confirm that I have read and understood the Risk Assessment and Method Statement
8	J. GUSTONIS	20/9/23		I confirm that I have read and understood the Risk Assessment and Method Statement
9	D. MARCULAITIS	25/09/23		I confirm that I have read and understood the Risk Assessment and Method Statement
10	A. MAKABALSKAS	25/09/23		I confirm that I have read and understood the Risk Assessment and Method Statement

Signed:

Position:

SUPERVISOR

Print Name: K. KULSINSKAS

Date: 01/08/2023

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)