

		0,	Site Manager's Daily Safe Start	ger's Dai	y Saf	e Sta	せ		
Contract:	84 MOORGATE	Contracts Manager Site Manager	Paul Haugh Dave Sanders	Dâte (w/c):	0	04/03/2024	24	Method statement (s)	RCL 84M-RCL-7Z-7Z-MS-A-00001 rev C01
Location and descrip	ption of work: Installi	Location and description of work: Installing temporary door sets and window boards	and window boards	10					
			Site M	Site Manager's Daily Sign Off	Sign Off				
		Date		Name		Signature	ē	Hot Topics of the Day (the main points you discussed)	the Day ou discussed)
Monday		04/03/2024		D Sanders	P	7	<	Lead	
Tuesday		05/03/2024		D Sanders	P	3	K	Needlestick injuries	injuries
Wednesday		06/03/2024		D Sanders	P	3	15	Security on site	n site
Thursday		07/03/2024		D Sanders	P	N	calo	Slips falls and trips	d trips
Friday	And the second s	08/03/2024		D Sanders	Q	S	5	Asbestos	SC
Saturday		09/03/2024		N/A				N/A	
Sunday		10/03/2024		N/A				N/A	
			Ope	Operatives Daily Sign Off	gn Off				
Name		Signature	A	≫	۲	щ	S	Comments	nts
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DE IF YOU MAYERWORK THAN TO OPERATIVES ON SITE, FLEKSE OSE THE CONTINUATION SPEEDSO		
before starting work, STOF, THINN and CHECN 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	>	
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		

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Has the task or working environment changed significantly to require a risk assessment and

Have the team members changed? (If yes revise)

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



RCL TRAINING AND DEVELOPMENT PLAN SHORT TRAINING SESSION ATTENDANCE SHEET

Title: Needlestick injuries	Date: 05/03/2024
Location: 84 MOORGATE	Start Time: 07:30
Duration (Minutes) 30 mins	End Time: 08:00
Presenter's name: D Sanders	Presenters Signature:
	1 De march

Candidate's Name	Name of Candidate's Employer	Candidate's Signature
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	RAPHAEL CONTRACTING LTD	1 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
10	30 mins	5 hours	2453745
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Toolbox Talk No. 45 NEEDLESTICK INJURIES

WHAT IS A NEEDLESTICK INJURY?

An accidental puncture of the skin by a hypodermic needle

IF YOU FIND A NEEDLE:

- It has probably been used by a drug user and may be contaminated by infected blood
- Do not touch it or move it, unless you have to because of the situation at the time
- Leave a responsible person to safeguard it whilst you report the matter to your supervisor
- If you have a site nurse, she or he should be informed
- If you do not have a nurse on site, the local Council's Environmental Health Department should be informed
- If you must move the syringe or needle:
 - o Carry it with the needle pointing downwards
 - Do not wrap it in paper or put it into a litter bin
 - o If available, place it in a clear glass bottle or jar
 - Dispose of it safely through the site nurse, local police or Council's Environmental Health
 Department
 - Wash your hands thoroughly

IF YOU SHOULD PRICK YOUR SKIN

- Do not panic
- Gently squeeze the area around the wound to encourage bleeding
- Do not suck the wound
- Wash the site of the injury thoroughly with soap and water at the first opportunity
- Obtain medical assistance as soon as possible from either the site nurse or the nearest hospital with an Accident and Emergency Department
- If you can do so safely, take the syringe or needle with you
- If dealt with properly and promptly, the risks of a resulting health problem are small
- Think about the consequences of not acting promptly and possibly being off work for several weeks while you recover

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RCL TRAINING AND DEVELOPMENT PLAN SHORT TRAINING SESSION ATTENDANCE SHEET

Title: Slips ,falls and trips	Date: 07/03/2024
Location: 84 MOORGATE	Start Time: 07:30
Duration (Minutes) 30 mins	End Time: 08:00
Presenter's name: D Sanders	Presenters Signature:
	Market

Candidate's Name	Name of Candidate's Employer	Candidate's Signature
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A STATTS	RAPHAEL CONTRACTING LTD	I Confirm that I kay understood the Toolbox Talk
J SMITH	RAPHAEL CONTRACTING LTD	I Confirm that I have understood the Toolbox Talk
J KIDECHA	RAPHAEL CONTRACTING LTD	I Confirm that I have understood the Toolbox Talk
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D RASCICLAL	RAPHAEL CONTRACTING LTD	I Confirm that I have understood the Toolbox Talk
K O'MALLEY	RAPHAEL CONTRACTING LTD	I Confirm that the value understood the Toolbox Talk
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<u>Grant Claim information</u> Note: Claims can only be made for your employees or labour-only sub-contractors

No. Attended	Duration	Total Time	Employer Reference	
10	30 mins	5 hours	2453745	





Toolbox Talk No. 49 SLIPS, TRIPS AND FALLS

Fact: Approximately 25% of accidents at work are attributed to slips, trips, and falls.

WHY DO THEY OCCUR?

- Most injuries from slips, trips and falls occur because of poor housekeeping
 - Many items such as coiled cables, hand tools, lengths of pipe or timber etc. left on the ground will trip someone if not deposited in a safe position
- Spilt substances such as oils and greases will form a slip hazard if not immediately cleaned up
- General debris such as brick and block fragments etc. can quickly accumulate and form a tripping hazard if not cleaned up as it is created
- Trailing cables are another frequent cause of tripping
- Mud left on the rungs of a ladder by the previous user will represent a slipping and failing hazard for the next person
- Reduced levels of natural light, for example during winter afternoons, can easily increase the tripping hazards if adequate access lighting is not provided. Tools, equipment and materials which are visible in full daylight might be hidden in semi-darkness
- Q: Name five hazards in your workplace that are caused by poor housekeeping.

WHAT CAN YOU DO ABOUT IT?

- Clear up waste materials as you create them. Lightweight waste should be bagged or bundled, and nails removed from waste timber
- Do not leave tools, equipment or unused materials lying about on the floor
- If you are using substances which might possibly spill, ensure that you have a means of effectively clearing up the spillage
- As far as possible, route cables for power tools above head height. If cables have to be routed at floor level, try to avoid crossing pedestrian walkways
- If the site is muddy, scrape mud off your boots before climbing ladders or walking anywhere else where it might be a danger to others
- Be aware of the increased risks of tripping as the level of natural light fades; ensure that all tools, equipment and materials are stored in a safe location

Questions for you:

- Q: Why should you ensure that good housekeeping standards exist in your workplace?
- Q: What hazards are posed by rubbish in your workplace?
- Q: What precautions can you take to make your workplace safer for everybody?

REMEMBER: If you ignore it, you condone it



TRAINING AND DEVELOPMENT PLAN SHORT TRAINING SESSION ATTENDANCE SHEET

Title: Site quiet Times	Date: 04.03.24
Location: Millennium Bridge House	Start Time: 07:30
Duration (Minutes) 30min	End Time: 08:00
Presenters name: A. Kulsinskas	Presenters Signature:

	Candidate's Name	Name of Employer	Candidate's Signature
1	D.Nunes	RCL	I confirm that I have understood the Tool Box Talk
2	A.Makarauskas	RCL ALLOWS	Loopfirm that I have understood the Teel DeviTell
3	V.Gustainis	RCL	I confirm that I have understood the Tool Box Talk
4	I.Neagu	RCL Neagu	I confirm that I have understood the Tool Box Talk
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5	D.Marciulaitis	RCL	I confirm that I have understood the Tool Box Talk
6	B.Ramchande	RCD CA CA	
7	G.Diaconu	RCL	I confirm that I have understood the Tool Box Talk
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8	A.Fediuk	RCL	
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Grant Claim information

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

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TRAINING AND DEVELOPMENT PLAN SHORT TRAINING SESSION ATTENDANCE SHEET

Title: Hand arm vibration	Date: 05.03.24
Location: Millennium Bridge House	Start Time: 07:30
Duration (Minutes) 30min	End Time: 08:00
Presenters name: A. Kulsinskas	Presenters Signature:

	Candidate's Name	Name of Employer	Candidate's Signature
1	D.Nunes	RCL	I confirm that I have upperstood the Tool Box Talk
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3	V.Gustainis	RCL	I confirm that have understood the Tool Box Talk
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PERSONAL PROTECTIVE EQUIPMENT ISSUE REGISTER

SITE: MBHS01

	DATE	15.02.24	15.02.24	15.02.24	15.02.24	15.02.24	20.02.24	21.02.24	26.02.24	27.02.24	92.60.00		
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