



HEALTH & SAFETY HANDBOOK

Information for Staff,
Customers and Contractors

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INTRODUCTION

Welcome to Site Weld NZ Ltd.

This handbook is provided by Site Weld NZ Ltd to ensure all its Employees, Contractors, Sub-contractors, Visitors and Customers are aware of its Health & Safety requirements as a condition of employment or working and being on its premises.

Health and Safety is to be an integral part of all work conducted in our business. If you are an employee or contractor as a prior condition to commencing work, you are required to read through this manual to ensure you understand our Health and Safety requirements.

On the following pages you'll find a series of Site Weld NZ Ltd most important safety issues. They are laid out under headings; General Requirements, Emergency Response, Hazards, Procedures and Forms.

Since in many sections of our operation employees may find themselves working or operating in any number of situations at company or non-company facilities (at the customers site), it therefore becomes necessary to know and understand the requirements of each of these elements.

New employees and contractors are required to complete an assessment to test their understanding and competency after this handbook has been explained and demonstrated to them at an induction. The assessment can be found in Section Six - Contractors.

Failure to follow these steps may result in your employment or contract being discontinued.

Stephanie & Adrian Olsen
Directors / Owners

SECTION ONE – HEALTH AND SAFETY POLICY STATEMENT

1. Health & Safety Policy Statement

Site Weld NZ Ltd has a signed policy commitment to Health and Safety. This will be updated annually, ensuring that Health and Safety is given importance in all areas of work. Management is committed to Health and Safety, to recording Health and Safety matters and involving staff in all Health & Safety. This extends to ensuring that staff representatives are trained in all aspects of Health and Safety. This further extends to creating a Business Plan including Health and Safety objectives, to be met in the first instance by setting Health and Safety objectives and later extending these to a full business plan. All Health and Safety policies will be reviewed under the objectives and plan.

Site Weld NZ Ltd is committed to recording all Health and Safety meetings and ensuring that documented processes are in place for all Health and Safety areas. Ongoing consultation with employee representatives will take place.

The Policy is at the back of this Handbook under Section Five – Policies, Procedures & Forms.

2. Hazard Identification Policy

Hazards have been initially identified and communicated to all employees.

This process will be ongoing in ways outlined:

- Six monthly review of hazards by Health and Safety representatives
- Post-accident and incident follow-up
- In addition, employees are encouraged to identify hazards they encounter
- New and potential hazards shall be taken into account when purchasing major items of new equipment.
 - Consultation with staff shall take place in respect of any hazards associated with new equipment.
 - Thorough training will be given to staff in the use of the new equipment and any hazards associated with it
 - This will in turn be entered into the training register for review.
- In the event of a new hazard being found, the following points will be considered
 - Is this a significant hazard?
 - Is it likely to cause serious harm?
 - Can it be eliminated?
 - Can it be isolated?
 - What controls need to be put in place (i.e. minimised)

3. Health Monitoring

Site Weld NZ Ltd is committed to ongoing monitoring of known health hazards. Further the company will monitor potential health hazards and formulate appropriate policies and procedures for any identified hazard. This will be reviewed annually.

4. Training and Supervision

Site Weld NZ Ltd acknowledges the importance of ensuring all new staff are fully trained in Health and Safety matters.

When employing new staff, Site Weld NZ Ltd will take the following steps:

- Check the qualifications of the new employees.
- Go thru with the new employee the Health and Safety induction sheet which includes SOP's relating to their role.
- Check that the new employee understands the Health and Safety procedures in place.

Site Weld NZ Ltd will obtain outside advice as necessary to ensure that employee representatives are kept informed of their rights and obligations in the Health and Safety field, and are sufficiently trained to carry out their role.

5. Incident, Accident and Near Miss Reporting and Recording

All incidents, accidents and near misses are to be reported in the first instance to the Health and Safety Rep. They will then complete the Accident Register and the Incident form, and in the case of serious harm, complete the appropriate form and send it to Worksafe NZ. This will be followed up in accordance with the follow up forms and review of hazards.

6. Health and Safety Employee Participation

All employees are to be advised of their rights and responsibilities under the Health & Safety at Work Act 2015 (HSW 2015). It is acknowledged that the number of staff is large enough to have employee representatives. However, all staff are encouraged to take responsibility in Health and Safety matters.

The emergency procedures, hazards, accident reporting procedures and Health and Safety plans are to be communicated to all staff. Staff are required to acknowledge in writing that they have been made aware of their rights and obligations under the HSW 2016.

Injury management and injury prevention initiatives will be discussed at staff meetings on a regular basis. Records shall be kept of any injury management, and these will be analysed from time to time. Staff initiatives for injury prevention will be listened to by management and implemented after consultation as agreed upon between management and staff.

Listed below are our current Representatives

SITE PRINCIPAL

Adrian Olsen

HEALTH & SAFETY CO-ORDINATOR

Chris McBride

APPROVED WORKER REPRESENTATIVES

Chris McBride, Stephanie Olsen, John Ashton,
Alastair Shand, Edward Johnson

WORKPLACE FIRST AID

Robbie Butcher, Larry Beattie, Joely Masoe, James McDouall,
Jack Pryor, Al Shand, Chris McBride

BUILDING WARDEN & DEPUTY

Receptionist and Office Staff

TOOLBOX MEETINGS

Toolbox Meetings with full staff participation are conducted every Monday.

7. Rehabilitation

On the return to work, following accident or illness, the company, where possible, may offer duties to the employee's capability and level of fitness as determined after consultation with the Employee and a medical practitioner and directed by your ACC45 Accident Form and your ACC18 Medical Certificate.

PERSON APPROVED

Stephanie Olsen

8. Emergency Planning and Readiness

Site Weld NZ Ltd is committed to their emergency plans and the ongoing review of them. These will be updated in line with the objectives six monthly. Emergency equipment shall be checked regularly and fire drills held six monthly. After any critical event, a review will be held with all staff and any necessary action taken.

FIRST AID KITS

THE FIRST AID KITS ARE:

ON THE WINDOW SILL IN SMOKO ROOM
AND IN THE BACKPACK ON THE OFFICE NOTICEBOARD

SPILL KITS

BESIDE LAY DOWN AREA

ELECTRICAL TAGGING AND TESTING

LINDSAY MARSHALL

FIRE EXTINGUISHERS & EVACUATION PROCEDURES
ALL AT EVERY ENTRANCE AND EXIT WAY OF THE BUILDING

FIRE ALARMS

OFFICE EXIT (MAIN DOOR), SIDE ENTRY INTO WORKSHOP, FRONT ROLLER DOOR,
REAR ROLLER DOOR

MEETING POINT DURING AN EVACUATION

CORNER OF WILLIS & TEWSLEY STREET AT THE ASSEMBLY POINT SIGN

9. Contractors

All contractors entering our site and working for Site Weld NZ Ltd will be required to understand our Health and Safety. Consideration will be given to Health and Safety matters when letting any contracts. Contractors will be asked to provide up to date and relevant Health and Safety information pertaining to their company. Contractors are to report any accidents or incidents immediately. In the event of any contractor working on site for more than one week, weekly health and safety reports are to be made to the Health and Safety Co-ordinator, including reports on hazards, accidents, near misses and other relevant Health and Safety information.

Signed: _____

Directors (Site Weld NZ Ltd)

Date: _____

SECTION TWO – HAZARD REGISTER

SPECIFIC HAZARDS DISCUSSED
HAZARD REGISTER

To help reduce the health and safety risks in your work area you need to report any hazards (something that has the potential to cause injury or harm). It is your responsibility to report hazards to the Site Weld NZ Ltd management.

You can do this by simply filling in the Hazard Form. If it is a new hazard it will have to be managed and controlled correctly. All the hazards that have been identified in your work area will be shown to you by way of a hazard register. Here are some common hazards that you need to be aware of and know how to work safely around them.

Manual Handling

Many painful injuries are caused by lifting, pushing or carrying, and are avoidable by using proper manual handling techniques.

Do not attempt to lift or carry loads that are beyond your physical capability, if it's too heavy use a mechanical lifting device or practice team lifting. Follow these steps:

- Plan the lift and the route to be taken.
- Test the size and weight of the load.
- Don't be a hero, get someone to help you if it is too heavy or too large.
- Stand close to the item/object with your feet apart.
- Bend your knees and lean forward.
- Get a good firm grip on the item/object.
- Use your leg muscles to lift, not your back.
- Never twist at the waist.
- Move your feet while lifting or moving a load.

Housekeeping

- Keep your work area clean and orderly, that includes your work vehicle.
- It is your responsibility to do this not the job of others.
- A tidy work area or vehicle promotes and encourages smart work habits.

Welding

If a welder is not used correctly the operator can be exposed to a number of hazards such as toxic fumes, dusts, burns, fires, explosions, electric shock, radiation, noise and heat stress.

Any of these hazards can cause injury or death you should follow the steps below in conjunction with a hot work permit, (see Section Five – Policies, Procedures and Forms).

- Use screens to protect bystanders.
- Keep a fire extinguisher close by.
- Ensure that you are not wearing any synthetic clothing that will catch fire or melt.
- Make sure flash back arrestors are used.
- Wear your safety gear, most importantly eye protection.
- Ensure there are no fire hazards in the defined welding area.
- Keep cylinders upright.
- If arc welding, never use defective or damaged cables or equipment & never use in wet conditions
- Always check hoses, valves, gauges and fittings before use. Do not allow grease or oil to contaminate fittings.
- Keep a look out for rogue sparks above, under or around the work area when the task is complete.

Hazardous Substances

- Hazardous substances e.g. adhesive sealant must not be introduced onto the site without a MSDS (Material Safety Data Sheets).
- This includes but is not limited to solvents, cleaning agents and flammable substances such as gases.
- The Clean Air Act does not allow any refrigerant to be vented or discharged into the atmosphere during installation, service or retirement of equipment. Refrigerants must be recovered & recycled.
- Be aware of the location of the emergency chemical spill kit if one is available.
- Never flush contaminants down the storm water drains when cleaning up spill.
- The control measures recommended in the Material Safety Data Sheets (MSDS) must be applied; copies must be readily available in your vehicle.

Compressed Air

Use suitable goggles, masks and other protective clothing when using compressed air.

Ensure that the correct fittings are available and being used.

Do not use compressed air to blow dust from clothing or skin this practice can be FATAL.

Always treat compressed air with respect.

Slips, Trips & Falls

Slips, trips and falls cause injuries. These injuries can be prevented by:

1. Good housekeeping (e.g. keep walkways clear at all times).
2. Reporting hazards.
3. Wearing appropriate PPE.
4. Good manual handling practices or techniques.

We can all prevent these injuries by looking out for spills, keeping the floor clear of obstacles/obstructions and by wearing the correct safety footwear. If you see something which could potentially cause a slip, trip or fall injury don't walk past and ignore it, do something about it. Remember housekeeping is everyone's responsibility.

Confined Spaces

A confined space is any space or volume:

- Not intended as a regular workplace.
- Has restricted ways of entry or exit.
- May have inadequate ventilation and/or atmosphere which may be contaminated or not have enough oxygen.
- Is at atmospheric pressure.

Some examples of these are:

- Storage Tanks (underground or above ground).
- Underground storm water drains.
- Roof work.

Before entering any confined space:

- Complete a Confined Space Course (Unit Standards 3058,18426,17599,19207).
- Make sure air quality has been tested and monitored.
- Make sure an observer is present for the duration of the time spent in the confined space.

Working at Heights

The use of safety harnesses, lanyards and other fall arrest equipment is mandatory when working above 1.8 metres. If there is no certified anchor point available, use a travel restraint method for your safety.

Working at heights requires you to have undertaken a Height Safety Course (Unit Standards 17600) A risk assessment should be carried out to determine whether an elevated work platform (EWP) (e.g. scissor lift, scaffolding or cherry picker) is required to do the job safely. Remember a ladder is designed to access work at heights not a work at heights platform. The following works will require fall protection procedures and equipment:

- Work near unprotected open edges of floors and all roofs.
- Work near unprotected penetrations or openings in roofs, floors and walls.
- Work near unguarded shafts or excavations.
- Work from unstable structures (temporary or permanent).

Work on or near fragile or brittle surfaces (e.g. cement sheeting roofs, fiberglass sheeting roof or skylights).

Ladders:

Ladders are not a fall protection measure; they are a means of providing access/ egress to a work area. Ladders are only to be used where it can be shown that other risk control measures are not practicable to remove or reduce the risk of falling.

Only ladders that conform to NZS 5233: 1986 or NZS 3609:1978 may be used.

When using your ladder make sure you:

- Position safety cones around the work site.
- Fix linkages (barriers) between cones to secure the site.
- Display caution signage outside the perimeter of the site.
- An observer to hold the ladder and ensure access to area is restricted.
- Stand the ladder on a level base.
- Set the ladder at the correct angle 4:1 ratio.
- Ladder must extend a metre above the landing.
- Secure the ladder by lashing at the top and bottom or have someone holding the base securely.
- Ensure the ladder is long enough to do the job or use an elevated work platform (EWP).
- Always face the ladder and use both hands (3 points of contact) when climbing up and down.
- Don't use a metal ladder near electricity.
- Always wear slip-resistant footwear when climbing a ladder.
- Never overreach sideways – get down and move the ladder.
- Never work from the top two treads.

Documented definition of Significance

Definition of a Hazard

"Hazard" -

(a) means an activity, arrangement, circumstance, event, occurrence, phenomenon, process, situation, or substance (whether arising or caused within or outside a place of work) that is an actual or potential cause or source of harm; and

(b) includes-

- (i) a situation where a person's behaviour may be an actual or potential cause or source of harm to the person or another person; and
- (ii) without limitation, a situation described in subparagraph (i) resulting from physical or mental fatigue, drugs, alcohol, traumatic shock, or another temporary condition that affects a person's behaviour.

The concept of a hazard is central to the Act's focus on preventing harm. Hazards must be systematically identified and managed.

Hazards can:

- be actual or potential
- be physical, biological, or behavioural (including temporary conditions that can affect a person's behaviour, such as fatigue, shock, alcohol or drugs)
- arise or be caused within or outside a place of work.

The term **hazardous** has a corresponding meaning.

Hazard notice

"Hazard Notice" means a notice that-

(a) describes a hazard identified in a place of work; and

(b) is in the prescribed form; and

(c) may set out suggested steps to deal with the hazard.

Only a trained health and safety representative can issue a hazard notice. Hazard notices are intended to act as a communication tool between trained health and safety representatives and their employers for the management of health and safety in the workplace. They are not enforceable

Significant hazard

Significant hazard means a hazard that is an actual or potential cause or source of -

(a) Serious harm; or

(b) Harm (being harm that is more than trivial) the severity of whose effects on any person depend (entirely or among other things) on the extent or frequency of the person's exposure to the hazard; or

(c) Harm that does not usually occur, or usually is not easily detectable, until a significant time after exposure to the hazard.

The definition of significant hazard is relevant to:

employer's duties to manage hazards under Part II of the Act

- duties of persons in control of a place of work
- departmental medical practitioners' powers to suspend employees or require them to undergo medical examinations.

SECTION THREE – HEALTH AND SAFETY EMERGENCY PLAN

EMERGENCY PROCEDURES

The site has an evacuation procedure. There are appointed people in each area specifically trained in emergency situations who take charge during an evacuation.

You must be familiar with these instructions:

In the event of an emergency:

Isolate electrical plant and equipment if safe to do so.

Leave the building by the nearest & safest exit.

Proceed to the designated assembly area,

Located at the corner of Willis & Tewsley Street at the assembly point sign.

Do not re-enter the building until the all clear has been given by the Building Warden.

Fire Safety

Reduce the risk of fire by maintaining good housekeeping and notifying the General Manager of any fire hazards you come across.

You should only attempt to extinguish a fire if it is safe to do so. Fire extinguishers are only intended for use on small fires or as a life saving device to enable escape.

Don't be a hero ring 111.

Earthquake

In the event of an earthquake remain in the room.

Move away from windows and tall or heavy cabinets.

Take immediate shelter under solid furniture such as tables or desks.

Await instructions from your Warden if evacuation is necessary.

Assemble at the assembly point.

Prior to evacuation and only if it is safe to do so, turn off all electrical appliances.

Hazardous Substances Spill

In the event of a hazardous substance spill, inform your supervisor and follow their instructions, they have been specifically trained in what to do.

Make sure you know the location of the chemical spill kit for clean up purposes.

Use the PPE provided for clean ups.

Know the location of Material Safety Data Sheets (MSDS).

Don't flush chemical spills down storm water drains.

First Aid

- All vehicles are equipped with first aid kits.
- If you require further treatment proceed to the nearest Treatment Provider such as the Mornington Health Centre or an A&E clinic.

YOUR COMPANY DOCTOR IS: The Mornington Health Centre

- If you have an incident on site, report it to your first aider.

YOUR FIRST AIDERS ARE: Robbie Butcher, Larry Beattie, Joely Masoe, James McDouall, Jack Pryor, Al Shand, Chris McBride.

- Record the treatment in the incident register (see Forms – Section 4).

Accident Reporting

- Report **ALL** incidents to the Health and Safety Co-ordinator or Safety Rep, using the correct form for all Injury and Near Misses (see forms at back)
- You need to fill out an Accident Report Form (see Forms – Section 4).
- If your injuries are classified as serious harm (see definition in Section Two) your employer must notify Work Safe within 24 hours of the accident occurrence and forward to them a Serious Harm Notification Form within 7 days of the accident occurrence (see Forms – Section 4).

Near Miss Reporting

A near miss is defined as an incident that almost happens and damage to equipment or people is narrowly avoided.

We call it a “Whew!” moment.

If this happens to you or you observe it happen to someone else, it is critical to our health and safety programme that it is reported.

You can do this on the Hazard Form (see forms at back)

We need to nip it in the bud before it happens again, next time may be FATAL

STAFF INSTRUCTIONS

If you discover a fire:

- Raise the alarm immediately by operating the nearest fire alarm/air horn.
- Potentially dangerous processes, machinery and gas should be closed down, if possible do so safely and with no delay.
- Leave the lights on. Leave immediately by the nearest safe exit route. Move quickly but **DO NOT RUN!**
- Report to the Assembly Area on the corner of Willis and Tewsley Street at the assembly point sign.
- Stay outside the building until the all clear is given.

If you hear the fire alarm or are warned of a fire:

- Follow the instructions of your Warden and Floor Sweepers, they will be wearing pink or blue hi viz vests.
- Potentially dangerous processes, machinery and gas should be closed down, if possible do so safely and with no delay.
- Leave the lights on. Leave immediately by the nearest safe exit route. Move quickly but **DO NOT RUN!**
- Report to the Assembly Area on the corner of Willis and Tewsley Street at the assembly point sign.
- Stay outside the building until the all clear is given
- Assist any person with a disability.
- ***IF YOU ARE A FIRST AID PERSON PLEASE TAKE THE FIRST AID KITS WITH YOU IF POSSIBLE***

**NO OTHER STAFF SHOULD TAKE IT UPON THEMSELVES TO HELP UNLESS
REQUESTED BY THE FLOOR WARDEN**

Proceed to assembly point to meet with the Fire Service or Emergency Response Team.

EMERGENCY INSTRUCTIONS FOR GENERAL STAFF NOT ASSIGNED TO AN EMERGENCY ROLE

On continuous sounding of the fire alarm...

Walk to the nearest exit taking any customers or staff members with you and proceed to the assembly point.

Do not help the Warden unless asked.

EVACUATION INSTRUCTIONS

ON CONTINUOUS SOUNDING OF THE FIRE ALARM, UNLESS GIVEN A TASK BY A WARDEN...

- **WALK TO THE NEAREST EXIT, TAKING ANY CUSTOMERS OR STAFF MEMBERS WITH YOU**
- **PROCEED TO THE ASSEMBLY POINT ON THE CORNER OF WILLIS AND TEWSLEY STREET**

DO NOT HELP THE WARDEN UNLESS ASKED

DO NOT RE-ENTER BUILDING UNTIL ALL CLEAR IS GIVEN BY THE BUILDING WARDEN

ASSEMBLY POINT



EMERGENCY CONTACT PHONE NUMBERS

FIRE, AMBUALNCE, POLICE. – PHONE 111

POWER SUPPLY

- Otago, Delta Energy Phone 0800 433 582

CIVIL DEFENCE – PHONE – 111

- Dunedin - Phone – 03 477 4000

GAS OR WATER

- Dunedin, Dunedin City Council - Phone – 03 477 4000

WORKSAFE NEW ZEALAND

- 0800 030 040

SECTION FOUR – GENERAL REQUIREMENTS

GENERAL REQUIREMENTS

Company Safety Rules

The following safety rules must be strictly adhered to at all times when carrying out work for or on behalf of Site Weld NZ Ltd:

- Where required or designated, approved safety equipment or clothing must be worn
- Machinery and equipment must not be operated without guards or with damaged guards
- Safety devices must not be tampered with or overridden
- Inspect machinery or equipment for hazards before use
- Follow recommended procedures for handling dangerous or hazardous substances (know where your MSDS sheets are located)
- Keep aisles, exits, driveways and fire extinguisher access clear
- Before entering a work area observe safety signs and rules
- Apply best practice manual handling techniques when lifting heavy objects, use team lifting or mechanical lifting devices where appropriate
- Report all unsafe acts and conditions
- Before starting any new project job, look for and discuss safety hazards with your supervisor
- You must not operate machinery or equipment unless you are adequately trained
- Be fully aware of evacuation and emergency procedures
- It is your responsibility to ensure housekeeping is maintained to a high standard
- If injured at work you must participate in the rehabilitation programme if deemed appropriate by your treatment provider
- You must report any injury, plant damage or near miss to your supervisor
- Do not engage in such other practices as may be inconsistent with ordinary and reasonable common sense safety rules.

Non-Company Facility Policy

The nature of the business requires Site Weld NZ Ltd and its employees to operate from a number of non-company facilities. Staff working at or out of non-company facilities must familiarize themselves with any special procedures at that site and understand and strictly adhere to the following procedures at all times:

All Site Weld NZ Ltd employees operating from non-company facilities are required to observe the health and safety standards set by the facility owner or occupant.

- All employees should make sure they understand the rules and operating procedures of the facility and be familiar with any special safety or emergency procedures which may exist at that facility.
- Where arrangements exist between the company and the non-company facility to operate any equipment, personnel must ensure they are approved to do so and that said machinery is in a safe condition and to the required standard for the operation being carried out. Site Weld NZ Ltd will assess each non-company facility in this latter regard and advise employees accordingly.
- Any accidents that involve employees at a non-company facility must in the first instance be reported to the Manager or supervisor of that facility. As soon as possible the accident must also be reported to the Health and Safety Co-ordinator and Director of Site Weld NZ Ltd.
- Employees must under no circumstances carry out any non-approved activity at a non-company facility using any Site Weld NZ Ltd equipment or vehicle, or equipment that is the property of the facility owner or occupant.
- Where an employee from Site Weld NZ Ltd is directed to carry out an activity or procedure that, in the opinion of the person concerned, is likely to be dangerous or cause injury to another person, or is not an approved safe operating practice, shall contact the Health and Safety Co-ordinator, Director of Site Weld NZ Ltd or person in charge of the company immediately before taking any further action.

- The rules governing smoking at any non-company facility must be observed by all SITE WELD NZ LTD employees.
- Before starting work at any non-company facility, hazard identification and assessment must take place so that any hazards brought on site can be conveyed to the non-company facility and appropriate control measures taken.
- Site Weld NZ Ltd employees must be fully aware and understand the non-company facility emergency evacuation procedures and the location of the assembly area.

Smoking

Smoking is strictly prohibited in any Site Weld NZ Ltd, building, vehicle and (includes company cars, vans or facility) with the exception of a designated smoking area.

Drugs & Alcohol

Illicit drugs are strictly forbidden from the premises.

Alcohol consumption on the premises is at the Manager's discretion.

Any person who reports for work or is seen on the site under the influence of drugs or alcohol is considered a menace to himself, his workmates and everyone else, and will therefore be asked to leave the site.

It isn't a clever thing to try and cover up for a mate if they've been drinking or taking drugs, for their sake, your sake and everybody else's sake advise your Manager before someone gets hurt!!

You will not be permitted to work if under the influence of drugs or alcohol.

Prescription drugs are permitted provided they do not impair an employee's ability to operate machinery or equipment in the workplace safely. If in doubt discuss the issue with your Manager.

As part of your contract you will be given a Drug & Alcohol Policy that outlines everything you need to know.

PROCEDURES

Hot Work

- A Hot Work Permit (see Appendix V) shall be filled out detailing the hazard controls to be used according to the work to be done, and prior to any work commencing.
- Consider the need for a firewatcher. The person conducting the hot work must know the location of firefighting equipment and be competent in its operation.

Always ask the question

“Can this work or task be completed safely without hot work being performed?”

Follow these steps for hot work:

- Isolate all dangerous goods within a 15 metre radius of the work area.
- Ignition source(s) to be screened using fire resistant material.
- Cones, linkages and signage erected to indicate the hot work area.
- Work area to be adequately ventilated.
- Dampen down the hazardous area if practicable.
- Fire extinguisher to be readily available.
- Gas cylinders to be stored upright and chained.
- Personal Protective Equipment to be worn.
- Ensure you are not wearing any synthetic clothing that will catch fire or melt.
- Check site 30 minutes after task is complete for rogue sparks or other ignition conditions.

Contractors & Sub-contractors

Site Weld NZ Ltd has a legal obligation for the safety of contractors and sub-contractors engaged to perform work on its behalf.

Contractors and sub-contractors need to understand our approach to health and safety and be familiar with the safety rules in this document and ensure its employees are made aware of these requirements. You will be required to complete the Site Weld NZ Ltd Contractor H&S Agreement (see forms at back).

In the event that contractors and sub-contractors do not comply with our safety standards Site Weld NZ Ltd may decide not to use them again.

Personal Protective Equipment (PPE)

Site Weld NZ Ltd provides PPE for your safety and benefit – use them as the occasion arises and check that:

- PPE provided offers you adequate protection for its intended use.
- It is properly maintained and any defects are reported immediately.
- It is returned to the proper storage after its intended use.
- Those using it are adequately trained on its safe use
- Do not rely entirely on PPE alone to protect you against hazards. Use PPE in conjunction with guards, engineering controls and written safe operating procedures.
- PPE is available to you for protection of the head, ears, eyes, breathing, hands, arms, feet and legs.
- In general, the minimum staff PPE requirements you should wear are safety footwear, eye protection, hearing protection, hi-viz vest, overalls or shirt at all times.

No synthetic clothing should be worn while undertaking any hotwork.

Practical Jokes/Horseplay

- Horseplay, skylarking or just clowning around has no place in our business.
- Practical jokes may get laughs, but it can end up by giving someone a lifetime of sorrow.
- That someone could be you.

Lock Out/ Tag Out

Lock out and danger tags are used to warn of danger or to indicate that tools, machinery and equipment are defective. This means they must not be operated because their operation may cause injury to workers or damage to machinery or equipment:

- Isolate the power at the main switchboard.
- Remove fuses, lock out MSB (equipment to include circuit breaker lock and padlock) and tag out the isolator switch.
- If you did not put on the padlock or tag you cannot take it off.

Loose Clothing & Long Hair

Do not wear loose clothing or untied loose hair when working onsite.

Severe accidents such as scalping or strangulation could occur when working in or around moving machinery or plant.

Training

- Site Weld NZ Ltd is responsible to ensure that persons who work for or on behalf of the company attend a safety induction-training course on their first day and prior to commencing work of any type.
- No person is to work on any machinery, equipment or process until they have been instructed and educated using job safety analysis (JSA) or safe operating procedures (SOP).
- Individual needs will be identified through performance appraisals including industry qualifications, site safe etc and training records kept on employees personal files

Tool Box Talks

Toolbox talks are an excellent method for communicating and obtaining employee involvement on health and safety issues.

Regular (good rule of thumb every week and no longer than 10 to 15 minutes) toolbox sessions need to be conducted with a prearranged health and safety topic on the agenda (e.g. wearing of safety gear, new safe operating procedure, hazard identified, a reported accident or near miss) and talks documented.

To ensure your toolbox talk is effective you should:

1. Carefully plan the session
2. Focus on a few key points eg wearing safety glasses when using electrical appliances
3. Use examples from personal or other experiences e.g. injuries or near misses
4. Employ actual tools or equipment for illustrations e.g. demonstrate safe work methods for using an electrical drill
5. Encourage worker participation

As with other forms of training, the more hands on experience people get the quicker they learn and the more they retain. If workers are encouraged to partake in the meeting they develop a feeling of ownership in the site safety programme.

The content of the toolbox talk is important also the energy and commitment you bring to it. Your people will quickly sense whether you are serious or just going through the motions. Make sure you always leave time at the end of the meeting to sum up and reinforce the key points.

Currently Site Weld NZ Ltd carries out a Tool Box Meeting every Monday morning and uses a specific sheet to carry out regular checks on all facets of Health and Safety.

Company Vehicles

It is your responsibility as the driver of a Site Weld NZ Ltd vehicle to maintain it in a safe condition, remembering that a vehicle is deemed a place of work under health & safety legislation in this country. A Safe Driving Policy and Procedures is given to you and forms part of your contract.

SECTION FIVE – POLICIES, PROCEDURES & FORMS

ENVIRONMENTAL POLICY STATEMENT

Site Weld NZ Ltd is committed to:

- Ranking the protection of the environment as a significant company objective
- Continuously improve our company environmental performance
- Using all our materials efficiently and effectively
- Integrating environmental issues within our financial decision making
- Using best practical options to prevent pollution
- Proactively managing waste and recycling wherever possible
- Complying at all times with applicable environmental legislation and environmental law
- Promoting the efficient use of resources
- Consulting with stakeholders, communities and interest groups
- Communicating this Environmental Policy to all persons working for or on behalf of Site Weld NZ Ltd
- Showing environmental leadership and encouraging companies we deal with to improve their own environmental performance

Signed:

Date:/...../.....

Adrian Olsen – Site Weld NZ Ltd

MARCH 2020

SAFETY EQUIPMENT POLICY

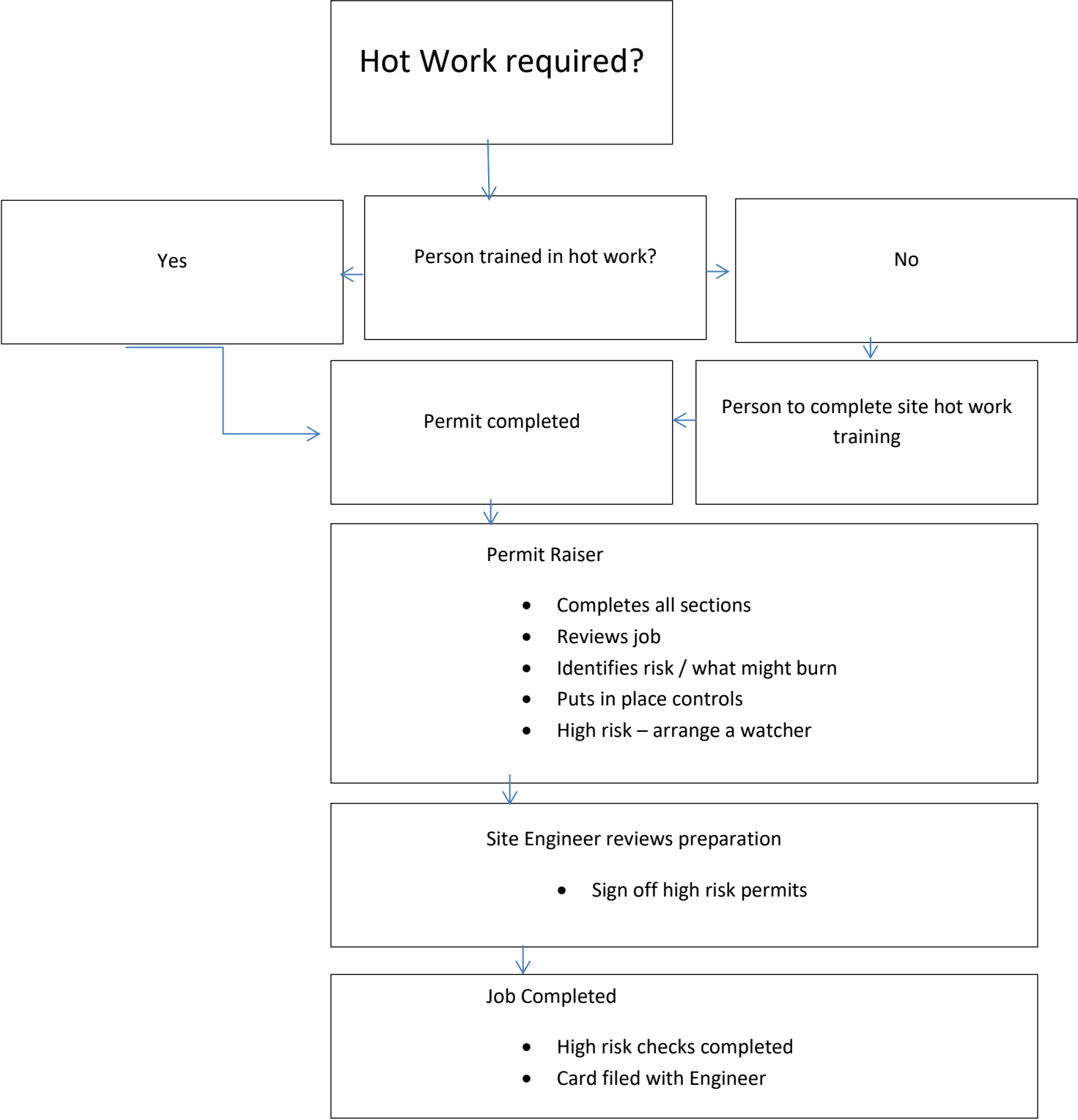
1. All staff members of Site Weld NZ Ltd will be issued upon permanent appointment with personal protective equipment.
2. The following minimum precautions should be observed whenever exposure to potentially dangerous situations occur:
 - Gloves – are to be worn to protect hands for specific jobs, minimum rating is 3131
 - Safety glasses – are to be worn at all times in the Site Weld NZ Ltd workshop (ASNZS 1337)
 - Respirator – can protect against contaminated atmosphere, such as gases or fumes
 - Safety Helmets – for electrical shock, falling objects and overhead structures – **only on specific Non-Company Sites**
 - Ear plugs or muffs – are to be used when excessive noise levels are prevalent
 - Steel capped footwear – are to be worn at all times at a client’s workplace and on the premises of Site Weld NZ Ltd
 - Hi-viz Vests or overalls – to be worn on client sites for easy identification when working around moving vehicles etc
3. All staff members are required to wear the safety equipment and clothing as the occasion arises or prescribed by a Safe Operating Procedure.
4. Site Weld NZ Ltd will provide training of the use of PPE. This training shall include the need for PPE, the proper type and personal fit of PPE, maintenance, inspection, and cleaning and proper storage of PPE.
5. Failure to comply with this policy could result in dismissal through the Site Weld NZ Ltd disciplinary procedures.

.....

I, have received the following safety equipment listed below and have read and agree to abide by the above conditions.

PPE Type	Date of Issue	Signature

All staff are given PPE gear on commencement and as needed.



Incident/Accident Report

Details of Occurrence & Injured Person						
Business Unit:		Reported by:			Injured Persons Name:	
Status: (circle correct response)						
<input type="checkbox"/> Employee		<input type="checkbox"/> Contractor		<input type="checkbox"/> Visitor		<input type="checkbox"/> No Injury
Length of Employment: (circle correct response)					Time & Date of Occurrence:	
<input type="checkbox"/> 1 st Month	<input type="checkbox"/> 1 – 12 Months	<input type="checkbox"/> 1 – 5 Years	<input type="checkbox"/> 5+ Years	<input type="checkbox"/> Non - employee	<input type="checkbox"/> N/A	_____am/pm / /
Where did it happen?						
<input type="checkbox"/> Workshop	<input type="checkbox"/> Admin	<input type="checkbox"/> Smoko Room	<input type="checkbox"/> Other	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
What Happened: (circle correct response)				Where does it hurt: (circle correct response)		
<input type="checkbox"/> Non-Injury	<input type="checkbox"/> Aggravated old injury			<input type="checkbox"/> Ankle		<input type="checkbox"/> Arm
<input type="checkbox"/> Bruising / crushing	<input type="checkbox"/> Burn			<input type="checkbox"/> Back		<input type="checkbox"/> Chest
<input type="checkbox"/> Cut / laceration / puncture	<input type="checkbox"/> Electric shock			<input type="checkbox"/> Ear		<input type="checkbox"/> Elbow
<input type="checkbox"/> Eye injury	<input type="checkbox"/> Fracture			<input type="checkbox"/> Eye		<input type="checkbox"/> Face, Lips, Nose
<input type="checkbox"/> Graze	<input type="checkbox"/> Head Injury			<input type="checkbox"/> Finger		<input type="checkbox"/> Foot
<input type="checkbox"/> Hearing Loss	<input type="checkbox"/> Infection			<input type="checkbox"/> Groin		<input type="checkbox"/> Hand
<input type="checkbox"/> Internal trunk injuries	<input type="checkbox"/> OOS			<input type="checkbox"/> Head		<input type="checkbox"/> Knee
<input type="checkbox"/> Sprain or strain	<input type="checkbox"/> Foreign body			<input type="checkbox"/> Leg		<input type="checkbox"/> Multiple locations
<input type="checkbox"/> Other	<input type="checkbox"/> Amputation			<input type="checkbox"/> Neck		<input type="checkbox"/> Shoulder
Which Side of Body; (circle correct response)				Type of Incident: (circle correct response)		
<input type="checkbox"/> Right	<input type="checkbox"/> Left	<input type="checkbox"/> Unspecified		<input type="checkbox"/> Near Miss	<input type="checkbox"/> First Aid Injury	<input type="checkbox"/> Medical Treatment Injury
Brief Description of the Event:				<input type="checkbox"/> Lost Time Injury	<input type="checkbox"/> Days Lost: _____	
				Is this a restricted work injury?		Yes / No
				Is this an Environmental Incident ?		Yes / No
				Did this incident cause property damage?		Yes / No
				Is this a "Serious Harm" injury?		Yes / No
About The Occurrence						
Describe what do you believe were the basic causes of this occurrence?						

Incident/Accident Report

Describe What the basic Hazard that was identified:				
What corrective actions have been taken?			Date to be Completed:	
			<i>Have these actions been completed :</i> <div style="text-align: center;">Yes / No</div>	
Why did this happen: (circle correct response)				
Abuse or misuse	Being hit by moving objects	Chemical / Substances	Defective procedure	Environment – Dust, Noise, Temperature
Equipment failure	Fall	Falling / Flying object	Gradual process	Knowledge lacking
Manual handling	Poor housekeeping	Procedure not followed	Stress / fatigue	Training issues
Unidentified hazard	Vehicle hazard	Other		

Please place any other general comments or draw a picture here;



FORM OF REGISTER OR NOTIFICATION OF CIRCUMSTANCES OF ACCIDENT OR SERIOUS HARM

Required for section 25(1), (1A), (1B), and (3)(b) of the Health and Safety in Employment Act 1992. For non-injury accident, complete questions 1, 2, 3, 9, 10, 11, 14 and 15 as applicable.

1. Particulars of employer, self-employed person or principal:
(business name, postal address and telephone number)

2. The person reporting is:

an employer a principal a self-employed person

3. Location of place of work:

(shop, shed, unit nos., floor, building, street nos. and names, locality/suburb, or details of vehicle, ship or aircraft)

4. Personal data of injured person:

Name _____

Residential address _____

Date of birth _____ Sex (M/F) _____

5. Occupation or job title of injured person:
(employees and self-employed persons only)

6. The injured person is:

an employee a contractor (self-employed person)
 self other

7. Period of employment of injured person:
(employees only)

1st week 1st month 1-6 months
 6 months-1 year 1-5 years Over 5 years
 non-employee

8. Treatment of injury:

None First aid only
 Doctor but no hospitalisation Hospitalisation

9. Time and date of accident/ serious harm:

Time _____ am/pm

Date _____

Shift Day Afternoon Night

Hours worked since arrival at work _____
(employees and self-employed persons only)

10. Mechanism of accident/ serious harm:

fall, trip or slip heat, radiation or energy
 hitting objects with part of the body biological factors
 sound or pressure chemicals or other substances
 being hit by moving objects mental stress
 body stressing

11. Agency of accident/ serious harm:

machinery or (mainly) fixed plant
 mobile plant or transport
 powered equipment, tool, or appliance
 non-powered handtool, appliance, or equipment
 chemical or chemical product
 material or substance
 environmental exposure (e.g. dust, gas)
 animal, human or biological agency (other than bacteria or virus)
 bacteria or virus



12. Body part:

- head neck trunk
 upper limb lower limb multiple locations
 systemic internal organs

13. Nature of injury or disease:
(specify all)

- fatal
 fracture of spine
 other fracture
 dislocation
 sprain or strain
 head injury
 internal injury of trunk
 amputation, including eye
 open wound
 superficial injury
 bruising or crushing
 foreign body
 burns
 nerves or spinal chord
 puncture wound
 poisoning or toxic effects
 multiple injuries
 damage to artificial aid
 disease, nervous system
 disease, musculoskeletal system
 disease, skin
 disease, digestive system
 disease, infectious or parasitic
 disease, respiratory system
 disease, circulatory system
 tumour (malignant or benign)
 mental disorder

14. Where and how did the accident/serious harm happen?
(if not enough room attach separate sheet or sheets.)

15. If notification is from an employer:

- (a) Has an investigation been carried out? yes no
 (b) Was a significant hazard involved? yes no

Signature and date

Name and position
(capitals)

HAZARD FORM



1: Hazard Identification: (section 1 & 2 to be completed by hazard initiator)

Description of Hazard (describe what can hurt you e.g. machine, equipment, process and how):
Name and position of person identifying hazard (for follow up purposes):

2: Type of Injury:

Amputation <input type="checkbox"/>	Death <input type="checkbox"/>	Fracture <input type="checkbox"/>	Poisoning & Toxic Effects <input type="checkbox"/>
Animal/insect bite <input type="checkbox"/>	Discomfort <input type="checkbox"/>	Graze <input type="checkbox"/>	Puncture <input type="checkbox"/>
Bruising or crushing <input type="checkbox"/>	Dislocation <input type="checkbox"/>	Hearing Loss <input type="checkbox"/>	Splinter <input type="checkbox"/>
Burn <input type="checkbox"/>	Electric Shock <input type="checkbox"/>	Multiple Injuries <input type="checkbox"/>	Sprain/strain <input type="checkbox"/>
Cut <input type="checkbox"/>	Foreign body <input type="checkbox"/>	OOS <input type="checkbox"/>	Superficial <input type="checkbox"/>

3: Hazard Assessment: (sections 3, 4 & 5 to be completed by Supervisor & hazard initiator)

Use the hazard rating table overleaf to determine score & insert here

Remember the lower the score the higher the hazard risk factor

4: Hazard Controls:

Control Measure (Start at the top & work down)		
Can the hazard be ELIMINATED ?	→ YES	How can the hazard be eliminated?
↓ NO		
↓ NO		
Can the hazard be ISOLATED ?	→ YES	How can the hazard be isolated?
↓ NO		
The risk is to be MINIMISED ?	→ YES	How can the hazard be minimised?

5: Corrective Actions Required as a result of Controls:

Action to be Taken:	Task Owner:	By When:

6: Hazard Monitoring: (section 6 completed by either Branch Operator, Supervisor & Safety Committee or Co-ordinator)

Review Action:	Task Owner:	By When:

--	--	--

7: **Hazard Register Updated:**/...../.....

Sign-off:
(Health & Safety Co-ordinator)

HAZARD RATING TABLE FOR SECTION 3: HAZARD ASSESSMENT

WHAT CONSEQUENCES COULD IT CAUSE?	HOW LIKELY IS IT TO BE THAT BAD?			
	Very likely ++ Could happen any time	Likely + Could happen sometime	Unlikely – Could happen, but only rarely	Very unlikely -- Could happen, but probably never will
Death or permanent disability	1	1	2	3
Long term illness or serious injury	1	2	3	4
Medical attention & several days off work	2	3	4	5
First-aid needed	3	4	5	6

HAZARD RISK ASSESSMENT

To calculate the hazard risk score you need to determine the Potential Likelihood and Potential Consequences. You can do this by using the risk assessment table above.

The **first step** is to determine the potential consequences (e.g. how severe the hazard could damage someone).

Decide if the hazard could:

- Kill or cause permanent disability or ill health
- Cause long term illness or serious injury
- Cause person to need medical attention and be off work for several days
- Cause person to need first aid

The **second step** is to determine potential likelihood.

Decide whether damage from the hazard is likely to be that bad:

- “Very likely” (i.e. it could happen anytime)
- “Likely” (i.e. it could happen sometime)
- “Unlikely” (i.e. it could happen, but only rarely); or it is
- “Very unlikely” (i.e. it could happen, but probably never will)

After you have decided the hazard likelihood and consequences match these two indicators on the table (e.g. Likelihood = Likely and Consequences = medical attention & several days off work, YOUR SCORE RATING IS “3”).

This score indicates the hazard to be significant and hazard control steps using Eliminate/Isolate/Minimise shall be implemented.

SITE WELD NZ LTD JOB SAFETY ANALYSIS



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Use this risk score and add to your hazards
(this risk score is used in the bware
programme)

Reduction Factor : 0

	Comments

V3.29 June 2016



SITE WELD NZ LTD

**CONTRACTOR HEALTH & SAFETY
AGREEMENT**

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CONTRACTOR HEALTH & SAFETY AGREEMENT

AN AGREEMENT BETWEEN: SITE WELD NZ LTD hereinafter referred to as the Principal,
and

Name: (Hereinafter referred to as the Contractor)

In the matter of the Health and Safety at Work Act 2016 (HSW 2015), which came into force on 1 April 2015, and Regulations thereto.

DUTIES OF THE PRINCIPAL:

- The Principal agrees to supply its staff with Health and Safety information so that Employees Training, Rules, Procedures, Emergency Plans, Health & Safety Policy and Schedule of Hazards have been advised.
- The Principal agrees to supply a copy of Accident/ Incident Report Form as and when required.
- The Principal or the Principal's representative will carry out periodic inspection of work sites.

DUTIES OF THE CONTRACTOR:

- The Contractor agrees to take all practicable steps to ensure the safety of employees (or other persons engaged) while they are at work, in terms of Section 6 of the HSE Act, and further agrees to where possible – identify, assess and control the hazard (using the hazard hierarchy of controls, i.e. Eliminate/Isolate/Minimise) in terms of Sections 7-10 of the HSW 2016.
- The Contractor agrees to operate its own Health and Safety System.
- The Contractor will ensure that its staff and any other persons engaged are given adequate training in Health and Safety, and are supplied with appropriate safety equipment which its staff and others engaged will use at all appropriate times.
- The Contractor undertakes to have and maintain an appropriate First Aid Cabinet (or kit) in each vehicle coming onto a site owned by the Principal. The Contractor will allow the agent of the Principal to inspect the cabinet or kit at regular intervals.
- The Contractor agrees to complete Accident Forms supplied and to report on any Near Misses, in terms of the HSE Act, and to return a copy of these to the Principal within two days from the date of occurrence.
- The Contractor agrees to inform the Principal of the hazards that the Contractor will bring onto, or create on the work site.
- If requested the Contractor will make available for inspection their safety records over the previous two-(2) years.
- The nominated Contractor will not use other sub-contractors to carry out any authorised work without the written approval of the Principal.
- The Contractor shall provide confirmation of Public Liability Insurance prior to work commencement and then annually thereafter (see Appendix C).

DURATION OF AGREEMENT:

This agreement will remain in force for the period that the Contractor is engaged by the Principal. In the event that the Contractor fails to abide by any of the duties within this agreement, the Principal may terminate this agreement forthwith, by the serving of notice in writing.

PROVISION OF ALTERATION:

The Principal reserves the right to seek any reasonable amendment for the purpose of improved compliance with the Health and Safety at Work Act 2015 (HSW 2015), Health and Safety in Employment Amendment Act 2002 and any other safety legislation.

.....

EXECUTION:

This Agreement is executed at

on of
(day) (month) (year)

Signed by Contractor:

Full Business Name of Contractor:

Signed on behalf of Site Weld NZ Ltd:

Witness: Date: /..... /.....

INTRODUCTION

The Health and Safety Agreement is custom written for the Health and Safety of Site Weld NZ Ltd, its employees, contractors, and general public. Every worker shares with Management the responsibility for the implementation of systems that identifies hazards or potential hazards on or about the work area.

Site Weld NZ Ltd is committed to maintain a high level of occupational Health and Safety awareness that includes wellness of its workers.

SCOPE

The purpose of this Health & Safety Agreement is to identify any existing or potential hazards for the project or task contracted to you on behalf of Site Weld NZ Ltd and you are required to:

- Make all persons in the area aware of such hazards.
- Take appropriate steps to eliminate, isolate or minimise hazards.
- Define physically the hazard area so as all persons in the work area can easily identify the hazard.
- Report the hazard to the appropriate authority or client.
- Report accidents and/or near miss accidents to Site Weld NZ Ltd.
- Carry out any health and safety audits and evaluations as directed.
- Read and follow all Job Safety Analysis (JSA) or Safe Operating Procedure (SOP) instructions for identified hazardous tasks.

Please ensure that before you commence any work on behalf of Site Weld NZ Ltd that you complete Appendix A, B and C of this agreement.

Adrian Olsen
Owner/Principal
SITE WELD NZ LTD

Health & Safety Management Questionnaire – Contractors

In order that Site Weld NZ Ltd and the Contractor meet their mutual obligations under the Health & Safety in Employment Act, Regulations and other relevant Legislation, the following questionnaire must be completed and documented evidence produced/attached where requested.

NOTE: All questions must be answered.

Are you a Supplier or offer Specialist Advice only?

Yes (Please go straight to the sign off page) No (Please complete all information)

Are you a Contractor?

Yes (Please complete all information) No (Please go straight to the sign off page)

Yes No

1. SAFETY POLICY AND MANAGEMENT COMMITMENT

- | | | |
|--|--------------------------|--------------------------|
| a) Do you have a written Health & Safety Policy? | <input type="checkbox"/> | <input type="checkbox"/> |
| b) Is the Health & Safety Policy communicated to the employees? | <input type="checkbox"/> | <input type="checkbox"/> |
| c) Do you have a safety administration structure in your organisation? (Organisation chart and description) | <input type="checkbox"/> | <input type="checkbox"/> |
| d) Who is your most senior person for managing Health & Safety matters, and what is their experience and qualification if any? | <input type="checkbox"/> | <input type="checkbox"/> |

Name: Experience:Years

2. PROCEDURES

- | | | |
|---|--------------------------|--------------------------|
| a) Do you have a Health & Safety Manual? | <input type="checkbox"/> | <input type="checkbox"/> |
| b) Do you have written Safe Operating Procedures and/or task instructions? | <input type="checkbox"/> | <input type="checkbox"/> |
| c) Do you regularly carry out (and document) Health & Safety inspections? | <input type="checkbox"/> | <input type="checkbox"/> |
| d) Do you use a 'Permit to Work System' for controlling critical tasks, such as Excavations, Confined Space, Working at Height, Hot Work etc? | <input type="checkbox"/> | <input type="checkbox"/> |

3. HAZARD IDENTIFICATION

- | | | |
|---|--------------------------|--------------------------|
| a) Do you have a JSA (Job Safety Analysis) form or SOP (Safe Operating Practice) which will cover any jobs performed for Site Weld? | <input type="checkbox"/> | <input type="checkbox"/> |
| b) Do you have a system to identify hazards during the term of the contract? | <input type="checkbox"/> | <input type="checkbox"/> |
| c) Where Hazards have been identified, is there a system to determine: | | |
| i. Significant Hazards? | <input type="checkbox"/> | <input type="checkbox"/> |
| ii. Methods of Control? | <input type="checkbox"/> | <input type="checkbox"/> |
| iii. Reporting of new Hazards? | <input type="checkbox"/> | <input type="checkbox"/> |

4. SAFETY TRAINING

- | | | |
|---|--------------------------|--------------------------|
| a) What Health & Safety Training is given to employees? | <input type="checkbox"/> | <input type="checkbox"/> |
|---|--------------------------|--------------------------|

Detail:

- | | | |
|---|--------------------------|--------------------------|
| b) Have employees been trained in the use of protective equipment relating to the potential hazards of that work? | <input type="checkbox"/> | <input type="checkbox"/> |
|---|--------------------------|--------------------------|

c) Please supply details of staff that will be engaged on this contract, possessing normal safety qualifications e.g. site safe passport.

Names: 1. _____ Expiry Date: _____
 2. _____ Expiry Date: _____
 3. _____ Expiry Date: _____
 4. _____ Expiry Date: _____

5. SAFETY RECORDS

	Yes	No
a) Do you keep safety records for the following?		
1. Fatalities?	<input type="checkbox"/>	<input type="checkbox"/>
2. Injuries? (serious harm)	<input type="checkbox"/>	<input type="checkbox"/>
3. Incidents? (near miss)	<input type="checkbox"/>	<input type="checkbox"/>
4. Environmental damage?		
b) Please supply an overview of your organisation's Health & Safety record for the last five years	<input type="checkbox"/>	<input type="checkbox"/>
1. Number of fatalities	No: _____	
2. Number of injuries where staff were off work for one day or longer	No: _____	
c) Please supply the number of accidents resulting in environmental pollution or damage.	No: _____	
d) Has there been any caution or prosecution by an enforcement Authority (e.g. Department of Labour)?	<input type="checkbox"/>	<input type="checkbox"/>

6. ACCIDENT INVESTIGATION

a) Has your organisation a procedure for reporting, investigation and follow-up of serious harm accidents, incidents and occupational illnesses?	<input type="checkbox"/>	<input type="checkbox"/>
b) Are the results of the investigation communicated to the employees?	<input type="checkbox"/>	<input type="checkbox"/>

7. SAFETY AWARENESS

a) Do you have in-house Health & Safety meetings or toolbox talks?	<input type="checkbox"/>	<input type="checkbox"/>
b) Does your organisation conduct Health & Safety inspections of it's operations?	<input type="checkbox"/>	<input type="checkbox"/>

8. INSURANCES

a) Do you carry any of the following insurances:		
1. Public Liability Insurance?	<input type="checkbox"/>	<input type="checkbox"/>
2. Motor Vehicle Insurance?	<input type="checkbox"/>	<input type="checkbox"/>
3. Motor Vehicle Insurance (third party)?	<input type="checkbox"/>	<input type="checkbox"/>
4. All Contractors Risk Insurance?	<input type="checkbox"/>	<input type="checkbox"/>
5. Others?:	<input type="checkbox"/>	<input type="checkbox"/>

State:

9. EMERGENCY PROCEDURES

a) Do your Emergency Procedures identify responsibilities and actions to be followed?	<input type="checkbox"/>	<input type="checkbox"/>
b) Have all staff received training in Emergency Procedures?	<input type="checkbox"/>	<input type="checkbox"/>
c) Have your employees carried out Emergency Drills within the last 12 months?	<input type="checkbox"/>	<input type="checkbox"/>

10. HEALTH MONITORING

a) Is employees' exposure to occupational health hazards monitored?
e.g. for exposure to noise and/or chemicals?

.....
.....
.....

SUB CONTRACTOR'S DECLARATION

"The above is a true record of
(insert company name) Health & Safety record and documentation."

Signed:.....

Position:.....

Date://

CONTRACTOR HAZARD MANAGEMENT

PART A: BASIC WORK DETAILS (To be filled in by the Contractor)

Date:/...../..... Sub Contractor Company & Address:

Person in charge of doing the work: No. of workers involved:

1. Have all workers & subcontractors been safely inducted? Yes No

2. Are all workers & subcontractors experienced and competent to perform the required tasks? Yes No

3. Expected duration of job: Date Commenced:/...../..... Date Completed:/...../.....

4. Job Description & Location:

5. Record any specialised equipment to be used e.g. (Hiab crane, gas detection equipment):

PART B: HAZARD IDENTIFICATION (To be filled in by the Contractor)

6. What type of hazards have you identified for this job/task? (Tick ✓ applicable)

Manual Handling	<input type="checkbox"/>	Handled Treated Timber	<input type="checkbox"/>	Dust	<input type="checkbox"/>	Lifting Equipment	<input type="checkbox"/>
Chemicals	<input type="checkbox"/>	Working at Heights	<input type="checkbox"/>	Noise	<input type="checkbox"/>	Fork Hoists	<input type="checkbox"/>
Timber Stacks	<input type="checkbox"/>	Uneven Surfaces	<input type="checkbox"/>	Nail Guns	<input type="checkbox"/>	Machinery (saws etc)	<input type="checkbox"/>
Armed Robbery	<input type="checkbox"/>	Electrical	<input type="checkbox"/>	Traffic	<input type="checkbox"/>	Atmospheric conditions	<input type="checkbox"/>
Stress	<input type="checkbox"/>	Stocking Shelves	<input type="checkbox"/>	Hot Work (e.g. welding)	<input type="checkbox"/>	Asbestos	<input type="checkbox"/>
Excavation	<input type="checkbox"/>	Demolition	<input type="checkbox"/>	Construction	<input type="checkbox"/>	Powered Hand Tools	<input type="checkbox"/>

Record any specific job hazards identified not included in above list, state precautions to take:

.....

PART C: HAZARD CONTROL (To be filled in by the Contractor)

7. Indicate (Tick ✓) steps taken to control identified hazard using the hierarchy of control (Eliminate/Isolate/Minimise)

Adherence to Legislation, Acts, Codes etc	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Fire/ Safety Watch Personnel	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Signage	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Supervision	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Danger/ Warning Tape to isolate area	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Electrical Appliances Tested/ Tagged	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Material Safety Data Sheets (MSDS)	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Waste Disposed	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Electrical Isolation, RCD etc	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Atmospheric Monitoring	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Health Check Undertaken	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Other: (state)	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Safe Operational Procedures available	Yes <input type="checkbox"/>	No <input type="checkbox"/>			

8. What PPE will be required to do the job safely? (Tick ✓ required gear)

Respiratory Equipment	<input type="checkbox"/>	Dust Masks	<input type="checkbox"/>	Harness	<input type="checkbox"/>	Hi-viz Vest	<input type="checkbox"/>
Hearing Protection	<input type="checkbox"/>	Welding Helmets	<input type="checkbox"/>	Goggles	<input type="checkbox"/>	Glasses	<input type="checkbox"/>
Foot Wear (Steel caps)	<input type="checkbox"/>	Overalls	<input type="checkbox"/>	Hard Hat	<input type="checkbox"/>	Full Face Shield	<input type="checkbox"/>
Apron	<input type="checkbox"/>	Gloves	<input type="checkbox"/>	Other: (state type)			

9. Specific site lock out/tag out requirements explained (if applicable)? Yes No

Signed on behalf of Contractor: Print Name:

PART D: COMMUNICATION (Between Contractor & Health & Safety Rep)

10. Communication of hazards and controls must be effectively discussed with all of your workers and sub-contractors and any others likely to be affected in the work area, before work commences:

Has this requirement been carried out? Yes No If Yes, when Date:/...../.....

Is this work Notifiable? Yes No If yes, notify OSH 24 hours in advance and attach a copy of notification form)

PART E: POST - CONTRACT AUDIT (To be completed by Health & Safety Rep)

Check if the contractor abided by this list of health & safety issues	Compliance Rating	Comments
Were contractor employee's safety inducted?	Yes <input type="checkbox"/> No <input type="checkbox"/> NA <input type="checkbox"/>	
Did you view confirmation of public liability insurance?	Yes <input type="checkbox"/> No <input type="checkbox"/> NA <input type="checkbox"/>	
Were contractor employees told where their emergency evacuation assembly point was?	Yes <input type="checkbox"/> No <input type="checkbox"/> NA <input type="checkbox"/>	
Were electrical equipment & hand tools guarded & electrically compliant with OSH standards? e.g. tested & tagged	Yes <input type="checkbox"/> No <input type="checkbox"/> NA <input type="checkbox"/>	
Were employees wearing protective PPE i.e. safety footwear, hearing protectors, safety glasses etc	Yes <input type="checkbox"/> No <input type="checkbox"/> NA <input type="checkbox"/>	
Was the work area adequately sign-posted, danger/warning tape used or barricade?	Yes <input type="checkbox"/> No <input type="checkbox"/> NA <input type="checkbox"/>	
Was a permit to work issued? e.g. welding = hot work permit, work at heights = elevated work permit	Yes <input type="checkbox"/> No <input type="checkbox"/> NA <input type="checkbox"/>	
Were all permit conditions fully adhered to?	Yes <input type="checkbox"/> No <input type="checkbox"/> NA <input type="checkbox"/>	
Were all hazards associated with the project identified?	Yes <input type="checkbox"/> No <input type="checkbox"/> NA <input type="checkbox"/>	
Was housekeeping kept and maintained to an acceptable standard?	Yes <input type="checkbox"/> No <input type="checkbox"/> NA <input type="checkbox"/>	

Auditors Name: Auditors Signature: Date:/...../.....

Name of Sub Contractor:
Address:
Description of Work:
Location:

PUBLIC LIABILITY INSURANCE

Name of Insurer:
Policy Number:
Expiry Date:
Sum Insured:

Signature of Contractor:

Date://

Note:

1. This form must be completed and returned to Site Weld NZ Ltd prior to the start of work with evidence of the currency of the above insurance(s). Should the contractor perform work on an ongoing basis evidence of the currency of insurance is only required once a year.
2. The contractors Public Liability Insurance must include a principal's extension and cross liability clause.

