

GCCG Buildsafe-NI

Contractor's Health and Safety Report

Project name _____

Project number _____

1. Management (*Note - GCCG Action 1 ensures management system is in place*)

- 1.1 Date of last visit of contractor's H&S Advisor _____
- 1.2 Have H&S Advisor's recommendations been implemented Y/N
- 1.3 Comments on management aspects

2. Accreditation of Operatives (*Note - GCCG Action 2 requires all operatives to have evidence of their training*)

- 2.1 Have all operatives acceptable evidence of training? Y/N
- 2.2 Were all unaccredited operatives accompanied whilst on site? Y/N
- 2.3 Number of professionals visiting the site since last report. _____
- 2.4 Number of visitors to the site since last report _____
- 2.5 Comments

3. Training

- 3.1 Training undertaken since last meeting

- 3.2 Training proposed before next meeting

- 3.3 Comments on training

4. HSENI Inspections

- 4.1 Date of Inspection _____
- 4.2 Number of Notices issued: Improvement _____ Prohibition _____
- 4.3 Comments on inspection _____

5. Accidents/Dangerous Occurrences

- 5.1 Since last meeting number of: Reportable Accidents _____
Non-Reportable Accidents _____ Near misses _____
- 5.2 All reportable events were recorded and reported Y/N
- 5.3 Amendments to procedures and practices have been implemented Y/N
- 5.4 Comments on accidents _____

6. Construction Health and Safety Plan

- 6.1 Is the Construction Health and Safety Plan current? Y/N
- 6.2 Has it been updated in advance of activities on site? Y/N
- 6.3 Have specific tasks been included? Y/N
- 6.4 Has Plan been agreed with all Sub-contractors? Y/N
- 6.5 Comments on Plan _____

7. Other Matters

- 7.1 Have all points raise by the Client's representatives been addressed? Y/N
- 7.2 Any other points _____

Signed _____

Date _____

On behalf of _____