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| **Name of BU** |  | | |
| **Scope of work:** |  | | |
| **Contract/Order number** |  | **Duration of the contract** |  |
| **Type of contract e.g. as and when/ full time** |  | | |

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| **Eskom Project Leader** |  | **Contact number** |  |
| **Name of Contractor Company** |  | **Total number of Employees** |  |
| **Contractor Responsible Person** |  | **Contact Number** |  |
| **Evaluation/ Assessment Date** |  |  |  |

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| **#** | **Legal and other Reference** | **Requirements** | **YES** | **NO** | **NA** | **Comments** |
| **1.** | **CONTRACTOR / Appointed contractor** | | | | | |
|  | OHS ACT 32 | Is the agreement signed Sec 37(2) |  |  |  |  |
|  | OHS Specification | Appointment of Contractor |  |  |  |  |
|  | OHS ACT | Letter of good standing |  |  |  |  |
|  |  | \* What is your registration number |  |  |  |  |
|  | OHS Specification | OHS Requirements issued to the contractor |  |  |  |  |
|  | OHS Specification | Health & Safety Plan specific to the scope of work |  |  |  |  |
|  | OHS Specification | Is there any appointed contractor (Subcontractor) |  |  |  |  |
|  | OHS Specification | Appointed contractor appointment by Contractor |  |  |  |  |

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| **2.** | **APPOINTMENTS – (a competent person)**  **SITE SPECIFIC ORGANOGRAM** | | | | | | | | | | |
|  | Sec 16(2) | | Designation Employer | |  |  | |  | |  | |
|  | Sec 17(1) | | OHS Representatives (more than 20 employees or risk based) | |  |  | |  | |  | |
|  | Sec 19(3) | | Chairman of SHE Committee | |  |  | |  | |  | |
|  | GAR 9(2) | | Competent person to conduct investigations | |  |  | |  | |  | |
|  | GSR 3(4) | | First Aider Level 2 | |  |  | |  | |  | |
|  | Sec 8 | | Contractor Supervisor (if applicable) appointment not to reference construction regulation)   * OHS Act & Legal Liability * Supervisory Safety * HIRA * Planned Job Observation | |  |  | |  | |  | |
|  | OHS Specification | | Contractor Safety Officer | |  |  | |  | |  | |
|  |  | | \* Full Time | |  |  | |  | |  | |
|  |  | | \* Part Time | |  |  | |  | |  | |
|  |  | | \* If part time what is the frequency of visits to site | |  |  | |  | |  | |
|  | OHS Act Sec 8 | | Competent person to conduct Risk Assessment and training/awareness | |  |  | |  | |  | |
|  | DMR 18(11) | | Operator of Lifting Machinery, Lifting Tackle & Forklifts | |  |  | |  | |  | |
|  | DMR 18(5) | | Inspector of Lifting Machinery Lifting Tackle | |  |  | |  | |  | |
|  | 32-418 | | Competent person to prepare the Fall Protection Plan | |  |  | |  | |  | |
|  | OHS Act | | Temporary electrical installation inspector | |  |  | |  | |  | |
|  | OHS Act | | Competent person for stacking & storing | |  |  | |  | |  | |
|  | OHS Act | | Competent person for inspection of fire equipment | |  |  | |  | |  | |
|  | PSR | | Responsible Person | |  |  | |  | |  | |
| **#** | **Legal and other Reference** | **Requirements** | | **YES** | | | **NO** | | **NA** | | **Comments** |
|  | SANS 10085 | Competent person for scaffolding | |  | | |  | |  | |  |
|  | OHS Act | Competent person to operate material hoists | |  | | |  | |  | |  |
|  | OHS Act | Competent person to inspect material hoists (checklist) | |  | | |  | |  | |  |
|  | EIR 7(1) | Master Installation Electrician (if applicable for COC – Proof of Certificate) | |  | | |  | |  | |  |
|  | OHS Act | Competent person for inspection of explosive powered tools | |  | | |  | |  | |  |
|  | OHS Act | Competent person for issuing & collecting of cartridges & nails | |  | | |  | |  | |  |
|  | OHS Act | Vehicle & mobile plants inspector | |  | | |  | |  | |  |

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| **3.** | **Legal and other Reference** | **RISK ASSESSMENT (will include)** | **YES** | **NO** | **NA** | **Comments** |
|  | OHS Act Sec 8 | Risk Identification |  |  |  |  |
|  | 32-520 | Risk Analysis |  |  |  |  |
|  | 32-520 | Risk Controls/Safe work procedure/Method statement |  |  |  |  |
|  | 32-520 | Risk Matrix and Rating |  |  |  |  |
|  | 32-520 | Monitoring Plan |  |  |  |  |
|  | 32-520 | Review Plan |  |  |  |  |

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| **4.** | **Legal and other Reference** | **INDUCTION TRAINING** | | | | |
|  | OHS Specification | * The Contractor training syllabus /programme |  |  |  |  |

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| **#** | **ACT** | **Requirements** | **YES** | **NO** | **NA** | **Comments** |
| **5.** | **Legal and other Reference** | **Working at heights** | | | | |
|  | 32-418 | Is the Fall protection plan in place, |  |  |  |  |
|  | 32-418 | Is the Rescue personnel (unit standard 229995) competent and appointed |  |  |  |  |
|  | 32-418 | Is the Rescue plan in place, signed and scope specific |  |  |  |  |
|  | 32-418 | Is the Working at heights risk assessment in place |  |  |  |  |
|  | 32-418 | Proof of training of employees working at heights (unit standard 229998) |  |  |  |  |
|  | 32-418 | Is the Medical fitness for duty assessments (refer to Annexure 3) in place? |  |  |  |  |
|  | 32-418 | Safety Harness Certificate and Inspections of fall protection equipment |  |  |  |  |

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| **6** | **Legal and other Reference** | **PERSONAL PROTECTION EQUIPMENT** | | | | |
|  | GSR2 & OHSACT 8(2)(b) | The risk-based PPE matrix in place |  |  |  |  |
| **7.** | **Legal and other Reference** | **CONFINED SPACES** | | | | |
|  | Plant Safety Regulations/ ERW 2,3,4 & 5 | Risk assessment in includes   * Lighting, ventilation, thermal environment, Ergonomics (awkward body positioning) |  |  |  |  |
|  | Plant Safety Regulations | Safe work procedure for working in confined space |  |  |  |  |
|  | GSR 5(3) | PPE Required – Breathing equipment |  |  |  |  |
|  | Safety Line & Safety harness |  |  |  |  |
|  | GSR 5(1) & 3(c) | Competency training for employees working in confined space |  |  |  |  |
|  | OHS Specification | Medical fitness certificate (refer to Annexure 3) |  |  |  |  |
|  | OHS specification | Weekly Toolbox talks (Signatures) |  |  |  |  |
|  | ERW 6 | Housekeeping inspection checklist |  |  |  |  |
|  | ERW 9 | Emergency evacuation plan/ Rescue plan |  |  |  |  |
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| **8.** | **Legal and other Reference** | **INCIDENT MANAGEMENT: 32-95** | | | | |
|  | COIDA | Incident management procedure aligned with 32-95 |  |  |  |  |
|  | COIDA & OHSACT 14(e) & 24 | Incident initial notification and investigation templates available |  |  |  |  |
|  | 32-95 | Incident register available (Appendix 2 register) |  |  |  |  |
|  | GAR 9 | Incident investigation Annexure 1 template |  |  |  |  |
|  | GAR 9 | WCL forms available |  |  |  |  |
|  | **Legal and other Reference** | **VEHICLE SAFETY MANAGEMENT: 32-345** | | | | |
|  | Eskom procedure 32-345  Sedans, Bakkies, Trucks and Minibuses | The vehicle inspection checklist |  |  |  |  |
|  | List of Vehicles onsite |  |  |  |  |
|  | Fire Extinguishers |  |  |  |  |

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| **9.** | **Legal and other Reference** | **PLANNED MAINTENANCE INSPECTION, REGISTERED RECORDS**  **(CHECKLIST)** | | | | |
|  | SANS 10085 | Scaffold, Inspection, testing and maintenance of fall protection equipment checklist |  |  |  |  |
|  | DMR 18(5) | Lifting machines and lifting tackle inspection checklist |  |  |  |  |
|  | DMR 18(5)(a)(b) | Lifting machines load test certificate |  |  |  |  |
|  | PER 11 | Vessels under pressure and fire extinguishers checklist |  |  |  |  |
|  | EMR 11 | Portable electric lights inspection checklist |  |  |  |  |

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| **10.** | **Legal and other Reference** | **RECORDS (Checklists or Templates)** | | | | |
|  | OHS Act | Certificate of system design for suspended platform |  |  |  |  |
|  | DRM 18 | Competencies of operators & inspectors of lifting equipment’s |  |  |  |  |
|  | OHS specification | Monthly inspection/audit checklist |  |  |  |  |
|  | OHS specification | Daily inspection checklist |  |  |  |  |
|  | OHS specification | Toolbox talk register (Template) |  |  |  |  |
|  | GSR 2 | Safety harness inspection tests by the manufacturer or Manufacturers manual |  |  |  |  |
|  | OHS specification | Training Matrix |  |  |  |  |
|  | OHS Act | Inspection results of material hoists checklist |  |  |  |  |
|  | OHS Act | Mobile plant inspection checklist e.g. tractors, yellow plant etc |  |  |  |  |
|  | OHS Act | Temporary electrical installation inspection checklist |  |  |  |  |
|  | HCAR 3 | Chemical Agents and Safety Data Sheet |  |  |  |  |
|  | OHS specification | Medical Fitness certificates |  |  |  |  |
|  | OHS specification | ID copies |  |  |  |  |
|  | GSR 3 | Accreditation certificate of the Service provider for First Aid training |  |  |  |  |

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| **12.** | **Legal and other Reference** | **COVID 19 REQUIREMENTS** | | | | |
|  | National Disaster Management Act | Covid-19 Workplace plan |  |  |  |  |
|  | National Disaster Management Act | Covid-19 Policy |  |  |  |  |
|  | National Disaster Management Act | Covid-19 Risk Assessment |  |  |  |  |
|  | National Disaster Management Act | Covid-19 Compliance Officer |  |  |  |  |

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|  | **More information required** |  | **Not Approved** |  | **Approved** |

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| **Evaluated/Assessed by:**  **Safety Officer** |  |  |  |
| ***Name*** | ***Signature*** | ***Date*** |

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| **Verified by Eskom Safety Manager** |  |  |  |
| ***Name*** | ***Signature*** | ***Date*** |