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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** | **Question** | **YES** | **NO** | **NA** | **Remarks** |
| **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/ OHS Requirements issued to the contractor |  |  |  |  |
|  | OHS Specification | Health & Safety Plan |  |  |  |  |
|  | 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 |  |  |  |  |
|  | Sec 8 | Contractor Supervisor |  |  |  |  |
|  | 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 |  |  |  |  |
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| **#** | **Legal and other Reference** | **Question** | **YES** | **NO** | **NA** | **Remarks** |
|  | OHS Act | Competent person for design and erection of cranes |  |  |  |  |
|  | SANS 10085 | Competent person for scaffolding |  |  |  |  |
|  | OHS Act | Competent person for suspended platforms |  |  |  |  |
|  | 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 to operate bulk mixing plant |  |  |  |  |
|  | 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** | **Remarks** |
|  | 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** | | | | |
|  | 32-726 | 1. Was the induction done by the Contractor |  |  |  |  |
|  | OHS Specification | * The Contractor training syllabus /programme |  |  |  |  |
|  | OHS Specification | * Attendance register of the induction course (to be provided before work commences) |  |  |  |  |
|  | 32-726 | 1. Was induction done by the Client (Eskom) |  |  |  |  |
|  | OHS Specification | * Proof of induction of person done by Eskom |  |  |  |  |

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| **#** | **ACT** | **Question** | **YES** | **NO** | **NA** | **Remarks** |
| **5.** | **Legal and other Reference** | **Working at heights** | | | | |
|  | 32-418 | Fall protection plan |  |  |  |  |
|  | 32-418 | Rescue plan |  |  |  |  |
|  | 32-418 | Risk Assessment |  |  |  |  |
|  | 32-418 | Training of employees working at heights |  |  |  |  |
|  | 32-418 | Medical fitness assessments (refer to Annexure 3) |  |  |  |  |
|  | 32-418 | Planned Inspections of fall protection equipment |  |  |  |  |
|  | 32-418 | The appointment of the competent Supervisor (training?) |  |  |  |  |
|  | 32-418 | Awareness of employees working at heights |  |  |  |  |

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| **6** | **Legal and other Reference** | **PERSONAL PROTECTION EQUIPMENT** | | | | |
|  | GSR2 & OHSACT 8(2)(b) | The risk-based PPE matrix in place |  |  |  |  |
|  | GSR2 & 8(b) | Register of PPE issued on site (risk based) |  |  |  |  |
|  | OHS Specification | Monthly inspections records of PPE |  |  |  |  |
|  | OHS Specification | Employees trained on the use of PPE |  |  |  |  |

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| **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) |  |  |  |  |
|  | 32-407 | Planned Inspections or behaviour-based inspection |  |  |  |  |
|  | 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 |  |  |  |  |
|  | First Aid kit |  |  |  |  |
|  | Fire Extinguishers |  |  |  |  |
|  | Emergency numbers displayed |  |  |  |  |

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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 |  |  |  |  |
|  | OHS Act | Competencies of erector, operators & inspectors |  |  |  |  |
|  | 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 | Induction programme |  |  |  |  |
|  | 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 |  |  |  |  |
|  | OHS specification | Worker’s timesheet/ daily attendance register |  |  |  |  |
|  | HCAR 3 | Chemical Agents and Safety Data Sheet |  |  |  |  |
|  | OHS specification | Medical Fitness certificates |  |  |  |  |
|  | GAR 8 | Endorsement of SHE Rep inspection & minutes by OHS Committee Chairperson |  |  |  |  |
|  | 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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| **Accepted by: Contractor Representative** |  |  |  |
| ***Name*** | ***Signature*** | ***Date*** |

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| **Verified by Eskom Safety Risk Management (Manager/Senior Advisor)** |  |  |  |
| ***Name*** | ***Signature*** | ***Date*** |

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| **Approval acknowledged by Eskom Project Leader** |  |  |  |
| ***Name*** | ***Signature*** | ***Date*** |

**Development Team**

1. Sichaba Molefe
2. Tshokolo Mofokeng
3. Mbazima Chabalala
4. Bheki Ramushu
5. Eric Ramadie
6. Njabulo Ndlovu
7. Gift Mamize
8. Tebogo Matlakala
9. Girly Mathebula
10. Lameck Nyakane
11. Mikateko Chauke
12. Florence Pooe