

Contractor's Policy

General Maintenance

- Contractors for gas and electrical repairs or installations must have appropriate professional registration.
- Contractors must take responsibility for their Health and Safety whilst on the Wood St Nursery premises, and be mindful of the Health and Safety of staff, children and visitors in so far as their work or presence may effect others. They should make requests of the management to ensure the Health and Safety of themselves, staff and children when necessary.
- Contractors must adhere to the Wood St Nursery Health and Safety Policy.
- A verbal Risk Assessment will be carried out with contractors working on site. If children are present during the course of works, then the Risk Assessment will be a written one. This will need to assess whether or not a Permit to Work is necessary.

High Risk Work

- Certain types of work carry a particularly high risk of serious injury, serious ill health or property loss and require more formal safety planning and control. We have a Permit to Work system for this type of work, please see guidance and templates below.

Asbestos Management

- An **Asbestos Management Report for Wood St Nursery** was carried out on 31/5/19 and a copy is kept by the Nursery in the **Building Compliance and Safety Certificates and Reports** folder. Asbestos has been identified and managed in the large hall and lobby interconnecting the halls, in the ceiling, and also under the eaves in the nursery garden.
- The Asbestos Report will be shared with any contractors carrying out works in the nursery buildings, and a signature requested to show that the contractor has taken responsibility for reading the report.
- If a contractor suspects they have discovered an asbestos containing material then they should inform the management immediately. The area will be evacuated and isolated by closing all doors and windows, and advice sought from a licensed contractor. Anyone who suspects they may have been contaminated by asbestos containing material should be isolated and decontaminated as quickly as possible, with clothing treated as contaminated waste.
- At Wood St Nursery we understand it is the duty of the responsible person to find out if asbestos is present in the nursery and that it is appropriately managed, as required by the **Control of Asbestos Regulations 2012**.

Checklist when contractors are at the setting:

- Check ID
- Check professional registration/qualifications
- Will the contractor be working in the same space as the children? If yes, please complete the RA below.
- Is a permit to work deemed necessary?

Contractor's declaration:

I agree to follow the Contractor's policy for Wood St Nursery and have read the **Asbestos Management Report for Wood St Nursery** dated 31/5/19.

Signed.....

Name.....

Company name.....

Date.....

Wood St Nursery Risk Assessment for Contractors

Date of risk assessment	What is the hazard and who could be harmed?	What is in place to reduce the hazard?	How serious is the risk?	What still needs doing to reduce the risk?	Who will carry this out and when?	Please date and sign when done.

Permit-To-Work Guidance

This document provides guidance on how to use a permit to work correctly, as follows:

1. The function of a Permit-To-Work and when to use one
2. How to complete the sections of the permit
3. Examples of work to be carried out under permit conditions

1. Permit-To-Work

Existing statutory provisions require employers to provide safe systems of work that are, so far as is reasonably practicable, safe and without risks to the health of employees and to others who may be affected by the work. However, certain types of work carry a particularly high risk of serious injury, serious ill health or property loss and require more formal safety planning and control. This can be achieved by the use of a Permit-To-Work system.

What is a Permit-To-Work?

It is an analytical tool to ensure that a series of checks, measures or controls are put in place before any person undertakes a particular activity risk assessed as having a high residual risk.

The aim of a permit-to-work is to:

- Specify the area of work
- Provide an adequate description of the work to be carried out
- Specify the control measures and safety precautions in place
- Identify who is undertaking the work
- Clearly state the time period over which the permit is valid (not exceeding one working day)

2. How to complete a permit-to-work

Often a Safe System of Work will be sufficient for work with associated risks that cannot be eliminated. A competent person will assess whether a task can be covered by a Safe System of Work alone or whether a Permit-To-Work is also required as the checking and monitoring tool that will ensure the higher risk rating for the particular task is addressed.

The PTW system itself will not ensure safety, it relies totally on the named personnel who implement and use the permit understanding the importance of following/complying with each stage of the permit procedure strictly.

These key personnel are usually the Senior Authorised Person who issues and cancels the permit, and the Authorised Person who is responsible for carrying out the work safely in the 'field'.

Degrees of competence:

Senior Authorised Person (Site Manager) –The person who authorises and issues a permit-to-work must have sufficient/adequate knowledge relating to the equipment being worked on, the control measures and safety precautions required, a clear understanding of the implications of a failure to follow the laid down procedures and sufficient knowledge to assess the competence of the persons in the field who will undertake the work.

Authorised Person (Contractor) – The person responsible for the work will be fully trained in the field of the work to be carried out. They must be aware of the safety of other persons coming under their control. They must ensure that the conditions of the permit are strictly adhered to and that no variations are introduced.

3. Component parts of a permit-to-work

ISSUE:

Completed by the Senior Authorised Person ensuring that each part of this section is completed, including:

- The work to be carried out
- A full description of the work to be done, clearly defining the boundaries and limitations and the length of time the permit is valid for, i.e. one working day.
- Safety/control measures that must be instituted – e.g. isolation of equipment, where isolated, requirement for barriers and signs, security of equipment to prevent falling or sliding.
- Other precautions – the use of any special equipment, PPE, special ‘one off’ instructions.

Note: Unless deemed to be suitably competent to a Senior Authorised Person level, a person cannot issue a permit-to-work to themselves.

RECEIPT:

Acceptance by the Authorised Person of the work to be carried out and the conditions required by the permit. This person is also signing to accept the conditions on behalf of other persons involved in the task and responsibility for their compliance with the conditions of the permit.

HANDOVER: (Change of responsibility)

This section shall be used when work cannot be completed within the timescale detailed on the permit by the first person(s) that the permit has been issued to, or, if the authorised person has to leave the work for a prolonged period for whatever reason. Both the Senior Authorised person who issued the permit and the new Authorised Person taking over the responsibility shall sign off this section.

CLEARANCE:

The Authorised (Responsible) Person shall confirm that:

- The work for which the permit was issued for is complete (or suspended)
- That all the control measures instituted during the work have been removed, e.g. isolation
- Whether power has / has not been restored
- All personnel, tools and equipment have been removed from the area.

CANCELLATION:

The Senior Authorised Person who authorised the work shall sign off the permit to confirm that the work is complete and the permit is cancelled. Note: If the work has not been completed and equipment/process has not been left in operational mode then they must ensure that adequate instruction and information is provided to this effect to relevant senior personnel (i.e. client management) and any person(s) affected by the work. This will include the use of suitable signage being attached to the equipment.

Permit-To-Work Tasks

The following are examples of tasks that would require a Permit-to-Work system used in conjunction with an appropriate Safe System of Work including the use of appropriate work equipment:

- Roof work (see example permit to work at height below)
- Open edge, fragile roof working
- ‘Live’ electrical working – specified work

- Specified 'Dead' electrical working involving circuit repairs or component repairs/replacement within a system – i.e. replacing fuses, breakers, isolators, transformers
- Confined spaces working (see example permit to work in confined space below)
- High risk activities identified by assessment
- Hot working – where flammable or combustible materials are present and cannot be removed or adequately isolated (see example hot permit to work below)

Permits to work can be issued for all contractor work completed on site. This is an effective way to ensure work on the site/premises are well controlled. Premises Managers with multiple sites will find such procedures useful in assisting with responsibilities under the Management of Health and Safety Regulations.

Permit-to-work templates are included below.

Hot Work Permit

Before initiating hot work, can this job be avoided? Is there a safer way?

This Hot Work permit is required for any temporary operation involving open flames or producing heat and/or sparks. This includes, but is not limited to: Brazing, Grinding, Soldering, Thawing Pipe, Torch Applied Roofing and Welding.

Instructions:

1. Verify precautions listed below or do not proceed with work.
2. Complete this permit and issue to person(s) performing the work.
3. Retain this copy in the project file.

Permit #:	Date:	Shift:	Work Order #:
Location of Work:			
Equipment Number:			
Purpose of work:			
Name of person(s) doing the work:			
Name of fire watch person:			

I verify the above location has been examined, the precautions checked on the Precautions Checklist below to minimize the chance of fire.

Supervisor's Name:	Signature:
Duration (Hrs):	Start Time:
	Stop Time:

Hot Work Permits may not be authorized for more than one shift!

Yes	No	N/A	Item
			Are water hoses or fire extinguishers available and in good repair?
			Is hot work equipment in good repair?
			Have flammable liquids, dust, lint and oily deposits within 35 ft. been removed?
			Have explosive atmosphere been eliminated? Test results:
			Has the work surface area been cleaned of grease, paint, etc.?
			Have combustible floors been wet down, covered with damp sand or covered with fire resistant sheets?
			Have surface areas below work area been protected?
			Have access ways below work area been barricaded?
			Are UV shields in place?
			Has enclosed equipment been cleansed of all combustibles?
			Have all containers been purged of flammable liquids and vapors?
			Will fire watch be provided during and for 60 minutes after work, including coffee and/or lunch breaks?
			Has fire watch been provided with suitable fire extinguishing devices?
			Has the fire watch person been trained in use of fire extinguishing devices and in sounding alarm(s) or other emergency communications?
			Has additional fire watch been assigned to adjoining areas, above and below?
			Hot work area will be monitored for 4 hours after completion of work?
			Other:
			Other:

Permit to Work at Height

Permit Number: _____	Date: _____
Site: _____	
Location: _____	
Contractor/ Employee: _____	Phone: _____
This permit is valid from: _____	am/pm On: _____
This permit is valid until: _____	am/pm On: _____
Description of works: _____ _____	

Note: The following section of this permit must be completed and signed by the authorised person(s) before work is to proceed and only work listed above may be completed.

The following equipment will be used during the works (all equipment to be used is in good working order and is fit for use):

- | | | |
|--|--|--|
| <input type="checkbox"/> Elevated work platform
(i.e. scissor lift) | <input type="checkbox"/> Roof and/or ladder anchor
points | <input type="checkbox"/> Ropes and harness |
| <input type="checkbox"/> Step ladder | <input type="checkbox"/> Extension ladder | <input type="checkbox"/> Edge protection |
| <input type="checkbox"/> Mobile scaffold | <input type="checkbox"/> Appropriate footwear | <input type="checkbox"/> Safety net |

Other (please specify): _____

The following services have been isolated for the duration of the works:

- | | | |
|--|--|---|
| <input type="checkbox"/> Smoke / thermal detectors | <input type="checkbox"/> Pipes, tanks and valves | <input type="checkbox"/> Electrical Outlets /
appliances |
|--|--|---|

Other (please specify): _____

The following control measures have been implemented for the duration of the works:

- | | | |
|-------------------------------------|----------------------------------|----------------------------------|
| <input type="checkbox"/> Barricades | <input type="checkbox"/> Signage | <input type="checkbox"/> Spotter |
|-------------------------------------|----------------------------------|----------------------------------|

Other (please specify): _____

The following environmental factors have been assessed and are suitable for the works:

- | | |
|---|---|
| <input type="checkbox"/> Weather / wind | <input type="checkbox"/> Stored material / vegetation |
|---|---|

Other (please specify): _____

This permit should be prominently displayed at the work site

Authorisation

Permit Issued To: _____

(Print name)	(Signature)	(Date)
Permit Issued By:		
(Print name)	(Signature)	(Date)

Cancellation/completion of permit		
Permit cancelled/returned by:		
(Print name)	(Signature)	
Cancelled/returned at:	am/pm	On:
Reason for cancellation :		

Final Sign Off		
The worksite has been inspected by me at the cancellation/completion of the work at heights and declared safe for normal operations to resume.		
(Print name)	(Signature)	(Date)

Permit to Work – Confined Spaces

1. PERMIT ISSUE *(For completion by authorised permit issuer)*

Permit Number:

Building/site name:			
Location of work:			
Description of work:			
Permit starts:	Date:	Time:	
Permit expires:	Date:	Time:	

- Confirm that work in the confined space cannot be avoided? Yes
- Risk assessment conducted identifying the nature of the confined space hazard, any introduced hazards and control measures required? Yes
 Yes
- Safe system of work/method statement documented and workers trained in the findings? Yes
 Yes
- Workers appropriately qualified for type of confined space entry and for confined space rescue as applicable? Yes
 Yes
- Are sufficient workers allocated to the job? *N.B. Lone-working not permitted. For a traverse, minimum of 2 persons to enter, plus top man.* Yes
- Competent supervision provided? Yes
 Yes
- All equipment available as per method statement and within calibration date where applicable including as applicable: winch, tripod, gas monitor, harnesses, PPE, first aid, communications, escape sets/breathing apparatus (BA), intrinsically safe electrical equipment? Yes
 Yes
- Rescue plan in place, equipment readily to hand and workers trained? Yes N/A
 Yes
- If the rescue plan involves rescuers entering the space, are there at least two staff who are equipped with BA and trained to use it? Yes N/A
 Yes
- Means of communication readily available? *N.B. Check signal* Yes N/A
 Yes
- Sludge/deposits removed, where applicable? Yes
- Space ventilated prior to entry?
- Plant/valves etc. isolated and locked off as necessary?
- Gas test OK?
- All persons fit to enter?

Specific safety requirements before commencing work:

Details of isolation points: *include mechanical, electrical and pipework isolations*

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Names of those authorised to enter Confined Space:
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In an emergency please contact:	(Name) on:	(Ext. no.)
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Issuer name (Block Capitals)	<input type="text"/>	Signature	<input type="text"/>	Date	<input type="text"/>
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2. RECEIPT (To be completed by person responsible for the work prior to working)

I understand the scope of work and precautions to be taken

Name (Block Capitals)	<input type="text"/>	Signature	<input type="text"/>	Date	<input type="text"/>
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3. EXTENSION OF PERMIT (If required)

Time extension:	Start	<input type="text"/>	End	<input type="text"/>
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Authorised person signature	<input type="text"/>	Signed for those undertaking the work	<input type="text"/>
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4. CLEARANCE (To be signed by both parties when work has stopped)

The area has been left in a safe condition, equipment and work materials have been removed.

Signed for those undertaking the work	<input type="text"/>	Date	<input type="text"/>	Time	<input type="text"/>
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Isolated plant has been reinstated. The Permit is now cancelled; all additional works will require a new permit to be issued.

Authorised person signature	<input type="text"/>	Date	<input type="text"/>	Time	<input type="text"/>
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