



# Contractor EHS Capability Assessment

Document Number: D02.01

				Yes	No
Are all workers (that will be assigned to work on any Fletchers site) qualified & competent to carry out their tasks?				<input type="checkbox"/>	<input type="checkbox"/>
Does your Company have third party certification or approvals (Circle applicable items)				<input type="checkbox"/>	<input type="checkbox"/>
QUEST	NZS4801	Site Safe		<input type="checkbox"/>	<input type="checkbox"/>
<b>1.2 Plant &amp; Equipment</b>					
Does your Organisation have a documented preventative maintenance programme for its plant, machinery and equipment?				<input type="checkbox"/>	<input type="checkbox"/>
When using plant and equipment either owned by you, provided to you by Fletcher Building or from any other party (leased, hired, borrowed etc) do you have systems in place to ensure that:				<input type="checkbox"/>	<input type="checkbox"/>
All plant is fitted with safety equipment as per legal requirements and/or Fletchers minimum standards e.g. ROPs/FOP's/COP's, seatbelts, quick hitches etc				<input type="checkbox"/>	<input type="checkbox"/>
Plant and equipment is safe to be used for the purpose it is intended				<input type="checkbox"/>	<input type="checkbox"/>
Your workers who are to operate the plant and equipment are trained in its safe use				<input type="checkbox"/>	<input type="checkbox"/>
Your workers have the correct licences and competencies to operate the plant and equipment				<input type="checkbox"/>	<input type="checkbox"/>
<b>1.3 Work Methods</b>					
Is your scope of work expected to involve working:				<input type="checkbox"/>	<input type="checkbox"/>
At heights				<input type="checkbox"/>	<input type="checkbox"/>
In Confined Spaces				<input type="checkbox"/>	<input type="checkbox"/>
With Chemicals				<input type="checkbox"/>	<input type="checkbox"/>
With Mechanical Plant				<input type="checkbox"/>	<input type="checkbox"/>
Hot Work (welding, working with hot bitumen etc)				<input type="checkbox"/>	<input type="checkbox"/>
With Compressed Gases				<input type="checkbox"/>	<input type="checkbox"/>
Do you have safe work practices in place for all of the above that you have responded "Yes" to?				<input type="checkbox"/>	<input type="checkbox"/>
Is your work expected to involve working around utility services such as:					
Gas	<input type="checkbox"/>	<input type="checkbox"/>	Electricity	<input type="checkbox"/>	<input type="checkbox"/>
Water	<input type="checkbox"/>	<input type="checkbox"/>	Telephone	<input type="checkbox"/>	<input type="checkbox"/>
Do you have safe work practices in place for all of the above that you have responded "Yes" to?				<input type="checkbox"/>	<input type="checkbox"/>
<b>1.4 Environment, Health &amp; Safety (EHS) Risk Management</b>					
Does your Organisation have a process to systematically identify hazards and control risks on site in a prioritised way, including the application of FB's risk matrix 9or equivalent) and application of ALARP principles?				<input type="checkbox"/>	<input type="checkbox"/>
Does your Organisation have a system to record risk assessment and controls?				<input type="checkbox"/>	<input type="checkbox"/>
Does your Organisation have a system to advise Fletchers of any risks you will introduce to the work site?				<input type="checkbox"/>	<input type="checkbox"/>
Does your Organisation have a process to ensure the safety of the general public in and around your work site?				<input type="checkbox"/>	<input type="checkbox"/>
<b>1.5 Induction and Training</b>					
Does your Organisation have a worker induction programme that includes EHS?				<input type="checkbox"/>	<input type="checkbox"/>
Does your Organisation maintain records of when workers are inducted and refresher training?				<input type="checkbox"/>	<input type="checkbox"/>
Does your Organisation have specific EHS rules?				<input type="checkbox"/>	<input type="checkbox"/>
If "yes", are the rules fully explained and understood by all workers?				<input type="checkbox"/>	<input type="checkbox"/>

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Does your Organisation provide and record specific health and safety training for workers?				<input type="checkbox"/>	<input type="checkbox"/>
Does your Organisation have a documented and implemented drug and alcohol policy?				<input type="checkbox"/>	<input type="checkbox"/>
Have your workers been alcohol and/or drug tested in the last 3 months?				<input type="checkbox"/>	<input type="checkbox"/>
Does your Organisation hold regular (at least weekly) safety (toolbox) meetings?				<input type="checkbox"/>	<input type="checkbox"/>
<b>1.6 Selection of Subcontractors</b>					
Will your Organisation contract out or involve other personnel besides your own employees in the work you complete for Fletchers?				<input type="checkbox"/>	<input type="checkbox"/>
If yes, does your Organisation have a process to determine the health and safety capability of subcontractors and other workers?				<input type="checkbox"/>	<input type="checkbox"/>
<b>1.7 Incident Management</b>					
Does your Organisation have: An Incident reporting/recording system?				<input type="checkbox"/>	<input type="checkbox"/>
An Incident Investigation Process?				<input type="checkbox"/>	<input type="checkbox"/>
Does your Organisation have a system to report incidents to the PCBU they are working for?				<input type="checkbox"/>	<input type="checkbox"/>
How many Full Time Equivalents (FTE) does your Organisation employ?				<input type="checkbox"/>	<input type="checkbox"/>
Has your Organisation had any of the following Incidents in the last 3 years?					
Fatalities	<input type="checkbox"/>	<input type="checkbox"/>	How Many?		
Serious Harm/Notifiable Incidents	<input type="checkbox"/>	<input type="checkbox"/>	How Many		
Medical Treatment Incidents	<input type="checkbox"/>	<input type="checkbox"/>	How Many		
Close Call/Near Hit/Miss Incidents	<input type="checkbox"/>	<input type="checkbox"/>	How Many (last 12 months)		
Incidents causing damage during a Contract	<input type="checkbox"/>	<input type="checkbox"/>	How Many		
Has your Organisation ever been prosecuted for a health and safety or Environmental breach?					
<b>1.8 Emergency Preparedness and Response</b>					
Does your organisation have an emergency response plan to deal with work site emergencies?				<input type="checkbox"/>	<input type="checkbox"/>
Will your organisation have Certified First Aiders and trained emergency wardens on site that can respond in the event of an emergency?				<input type="checkbox"/>	<input type="checkbox"/>
<b>1.9 Personal Protective Clothing and Personal Protective Equipment (PPC &amp; PPE)</b>					
Has your organisation assessed the jobs/tasks that require PPC/PPE?				<input type="checkbox"/>	<input type="checkbox"/>
Does your organisation provide/supply PPC/PPE to all workers as required?				<input type="checkbox"/>	<input type="checkbox"/>
Does the PPC/PPE provided comply with local/international Safety Standards?				<input type="checkbox"/>	<input type="checkbox"/>
Have staff been trained in its correct use,, maintenance, replacement and disposal?				<input type="checkbox"/>	<input type="checkbox"/>
<b>1.10 Health Monitoring</b>					
Does your organisation have a system in place to monitor the health of employees and other workers, as appropriate, with regard to any hazards they may be exposed to?				<input type="checkbox"/>	<input type="checkbox"/>
What is the frequency of your health monitoring programme? Please circle the frequency rate (in years).				1	2 3 4 5
<b>1.11 References</b>					
Provide two referees that can verify your company's capability and commitment to your management of health and safety. Referees may be contacted to verify capability, competency and safe work management.				<input type="checkbox"/>	<input type="checkbox"/>
Name:		Name:			
Company:		Company:			

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		Yes	No
Address:		Address:	
Telephone:		Telephone:	
<b>1.12 Insurance Coverage</b>			
Please <b>attach evidence</b> from your Insurance Company/Broker of your current Public Liability, Professional Indemnity and/or Motor Vehicle Insurance cover. <b>Please state any liability limitations for each event.</b>			
<b>2 Environmental Management Capability</b>			
Does your company maintain an ISO 14001 certified Environmental Management System?		<input type="checkbox"/>	<input type="checkbox"/>
Is your company considering ISO 14001 or the EnviroMark programme? If yes, are you able to provide details of the proposed action plan for implementation?		<input type="checkbox"/>	<input type="checkbox"/>
Is your company able to provide a list of environmental consents and permits that are relevant to the company's activities?		<input type="checkbox"/>	<input type="checkbox"/>
Has your company formally assessed the significant environmental aspects of its activities and the associated risks and impacts of these on the environment?		<input type="checkbox"/>	<input type="checkbox"/>
Does your company have a documented Environmental System and / or Environmental Plans?		<input type="checkbox"/>	<input type="checkbox"/>
Does the company have a specific policy or action plan relating to managing waste?		<input type="checkbox"/>	<input type="checkbox"/>
Does the organisation reuse and recycle waste?		<input type="checkbox"/>	<input type="checkbox"/>
Does the organisation try to reduce the waste it produces?		<input type="checkbox"/>	<input type="checkbox"/>
Has your company set targets for environmental improvements, for example, sustainable purchasing, carbon foot print, cleaner production etc?		<input type="checkbox"/>	<input type="checkbox"/>
Does your company have a specific policy or action plan relating to Transport? If yes, does this include:		<input type="checkbox"/>	<input type="checkbox"/>
<ul style="list-style-type: none"> <li>• A system for planning routes?</li> </ul>		<input type="checkbox"/>	<input type="checkbox"/>
<ul style="list-style-type: none"> <li>• An effective fuel-management system?</li> </ul>		<input type="checkbox"/>	<input type="checkbox"/>
<ul style="list-style-type: none"> <li>• Maintenance schedules for vehicles?</li> </ul>		<input type="checkbox"/>	<input type="checkbox"/>
Has the company set up a programme for training workers on environmental issues? If yes, does this include:		<input type="checkbox"/>	<input type="checkbox"/>
Keeping a record of all workers who receive training?		<input type="checkbox"/>	<input type="checkbox"/>
Regular updates on environmental issues?		<input type="checkbox"/>	<input type="checkbox"/>
Within the last three years has your company:		<input type="checkbox"/>	<input type="checkbox"/>
Been prosecuted for non-compliance with the Resource Management Act, a resource consent or permit?		<input type="checkbox"/>	<input type="checkbox"/>
Had any infringement, abatement or enforcement notices served on it by an environmental regulator or authority?		<input type="checkbox"/>	<input type="checkbox"/>
If yes to prosecution or infringement please give details:			