

Document 8: Health & Safety Assessment Questionnaire

West Sussex County Council

**Instructions for Completion:**

This questionnaire seeks information related to how you fulfil your duty to protect the health, safety and welfare of your employees and others affected by your business. You must complete this questionnaire as the contractor responsible for managing and coordinating health & safety. You are advised to seek advice from your competent person for Health & Safety when completing it.

Please ensure all information given is clear and complete. All questions must be answered unless stated. West Sussex County Council reserves the right to request additional health & safety information to check standards at any time.

Smaller contractors are advised to obtain relevant Health & Safety Information from <http://www.hse.gov.uk>

**Assessment Methodology**

**Questions 1, 2 and 3:** These questions are for information only but must be completed. Failure to answer these questions will result in a FAIL.

**Question 4**: For organisations containing 5 employee or more, you must include a copy of your signed and dated Health and Safety at Work policy with this tender submission. For organisations with fewer than 5 employees, you must include a signed Declaration of Intent (Appendix A). Failure to include the relevant document will result in a FAIL.

**Question 5**: Please either tick the first two or the second two boxes. If you are unable to tick both boxes for either an employee or a consultant, or you fail to include the supporting information requested, this will result in a FAIL.

**Questions 6, 7, 8, 11, 12, 14**: Failure to respond to these questions will result in a FAIL. Should the answer be deemed to be insufficient, lacking in any area, erroneous or raises concerns, then the Authority’s Health and Safety Team will liaise with you to better understand and improve your Health and Safety offer. If, as a result of further information being provided, there are still significant gaps in understanding and/or the Health and Safety Team feel there are significant risks then the authority reserves the right reject the submission as part of the due diligence process and not to award the contract. Questions which have asked for evidence must have evidence submitted, which is clearly linked to the relevant question. Several questions have multiple criteria/questions, all of which must be answered.

**Question 9**: Failure to complete the table will result in a FAIL. Where you are unable to provide data for a particular year or category (eg because you were not trading), then please either write N/A or include a supporting commentary to explain. Any supporting commentary should be provided below the table and clearly marked as such.

**Question 10**: Failure to tick all boxes and to provide supporting example risk assessments will result in a FAIL. Risk Assessments must: Identify the hazards and potential sources of harm, Determine who might be harmed and how, Evaluate the risks and determine on control measures, Be a clear record of your significant findings, and include Actions with clear responsibilities and review periods.

**Question 13**: If you tick yes and do not provide supporting information to contextualise why you were issued any prohibition or improvement notices from enforcing authorities, this will result in a FAIL.

**WORD COUNT**

Where qualitative or written responses have been asked for, please limit your response to no more than 100 words per question.

**SUPPORTING INFORMATION**

Several questions ask for supporting information. Where this is the case, please prefix your document file names with ‘Question 7’ so they can be clearly identified when your submission is being considered by the panel. Files should be submitted as Word, Excel or pdf files. The Document List table at the end of the question set provides a list of documents required and the prefix that the document should be saved with (e.g. Question 7.4 Health and Safety Policy).

All documents should clearly indicate your organisation’s name at the top of the document and in the footer. Each document should also clearly indicate which Health and Safety question it relates to.

Where supporting information has been requested failure to provide suitable information/documents, or unclear labelling, may result in a FAIL for that question.

**CLARIFICATIONS**

Clarifications relating to the Health and Safety Assessment Questionnaire should be addressed through the In-tend correspondence function.

**HEALTH AND SAFETY ASSESSMENT QUESTIONNAIRE**

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| **1** | **Name of Supplier** | *<<Insert organisation name here>>* |

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| --- | --- | --- |
| **2** | **Number of Employees** | *<<Insert number here>>* |
| *Please note that a Health and Safety Policy is a statutory requirement under section 2(3) of the Health & Safety at Work Act 1974 for a company of 5 or more employees. If you are a company of under 5 employees you are required to sign and return the attached Declaration of Intent with your tender submission.*  |

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| **3** | **Do you have CHAS / SSIP registration?** | [ ]  Yes, we have CHAS registration *<<Insert number here>>*[ ]  Yes, we have SSIP registration*<<Insert number here>>*[ ]  We do not have either CHAS or SSIP registration  |
| *If you have ticked either of the first two boxes (ie having CHAS or SSIP registration), please complete questions 10 onwards. If you have ticked the third box (not registered), please answer questions 4 onwards.* |

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| **4** | **Health and Safety at Work Policy: Number of Employees** | [ ]  We have 5 or more employees and a signed and dated Health and Safety at Work policy is included as part of this tender submission[ ]  We have fewer than 5 employees and we have signed the attached Declaration of Intent (Appendix A) which is included as part of this tender submission |

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| **5** | **Please confirm the Health and Safety Support you have in place:** | [ ]  Employee with Health and Safety responsibility for the organisation[ ]  We have included evidence of the employee’s health & safety qualifications and/or  training certificates with this tender [ ]  Consultant with Health and Safety responsibility for the organisation[ ]  We have included details of the Health & Safety consultant used by our organisation  (*name of company and a copy of their CV*) |
| *Please note: The Management of Health & Safety at Work Regulations 1999 (regulation 7) requires you have a competent person appointed for health & safety. This can be either a qualified company employee or a consultant.* |

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| **6** | **Please provide the following evidence of the health & safety training given to your managers and staff.**  | [ ]  We have included evidence/examples of health and safety training and/or attendance certificates provided to our staff |

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| **7** | **Please detail your arrangements for reporting and investigating accidents, incidents, and near misses, including notifying the HSE where required to.**  | [ ]  We have a process for reporting and investigating accidents, incidents, and near misses, including appropriate recording of information, and notifying the HSE if the incident is reportable under RIDDOR[ ]  We have provided our incident reporting template or other relevant evidence of our system |

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| **8** | **Please complete the following table, giving details of your accident statistics for your Employees over the past three years.**  |  |

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|  | **Two Years Ago** | **Last Year** | **This year to date** |
| **Number of persons employed including agency & volunteers** |  |  |  |
| **Number of fatalities** |  |  |  |
| **Number of 7-day incapacitations, specified injuries, or non-fatal accidents to non-workers under RIDDOR** |  |  |  |
| **Number of dangerous occurrences reportable under RIDDOR** |  |  |  |
| **Number of ill health reports under RIDDOR** |  |  |  |

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| **9** | **If you use volunteers, agency staff, or other similar sub-contracted staff, do you provide health and safety induction and training and monitor their health and safety performance?**  | [ ]  Yes, we provide health and safety induction, training, and performance monitoring to our volunteers, agency staff, or other similarly sub-contracted staff[ ]  We do not use agency staff, volunteers, or any other similar sub-contractors |

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| **10** | **Please provide completed example risk assessments for work tasks applicable to this contract.**  | *Tick to confirm examples are submitted with your tender application:*[ ]  Risk Assessment 1 [ ]  Risk Assessment 2[ ]  Risk Assessment 3  |
| *If any are not applicable to your work, or no specific examples have been requested, please provide at least three examples of the most reasonable alternative relating to the work activities under this contract.*  |

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| **11** | **Do you provide fire safety training to staff, including ensuring they are aware of other premises fire safety procedures where other buildings are used?**  | [ ]  Yes, we provide fire safety training to staff and ensure they are aware of local fire safety procedures. [ ]  We have provided evidence of fire safety training given to staff (e.g. training certificates or certificates of attendance).  |

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| **12** | **If you control your own premises, do you ensure they are properly maintained, and a suitable fire risk assessment is in place?**  | [ ]  Yes, we ensure our buildings are maintained and a fire risk assessment is in place and regularly reviewed and have provided evidence of our fire risk assessment and example maintenance records. [ ]  We do not own or control our own premises but ensure premises we rent/hire/access are suitably maintained.  |

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| **13** | **Have you have been issued any prohibition or improvement notices from enforcing authorities within the last three years?** | [ ]  Yes[ ]  No  |
| *If ‘yes’, you should provide further information below:*<< *include further information here* >> |

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| **14** | **Please describe your company’s arrangements for providing first aid to your employees when working on premises or off-site**  | [ ]  We ensure there are first aid trained staff always present and have provided an example of first aid training certification.[ ]  We have an emergency procedure in place that is communicated to all staff ensuring they know how to gain first aid or further medical assistance and have provided a copy.[ ]  We rely solely on first aid provision through local emergency services.  |

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| **15** | **If you use chemicals or other hazardous substances as part of your activities, do you make suitable and sufficient assessment to workers from hazardous substances and comply with the Control of Substances Hazardous to Health 2002 (COSHH). This should include information on Health Surveillance where relevant.**  | [ ]  Yes, we comply with COSHH and have provided evidence including example COSHH risk assessments[ ]  Where substances hazardous to health and use, stored, and transported we carry out suitable and sufficient risk assessments and provide relevant information on hazards and procedures to staff[ ]  We have procedures in place for health surveillance where required and staff are able and encouraged to report any issues or concerns to their managers[ ]  We do not use chemicals or other substances hazardous to health as part of our activities |

**Document List**

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| --- | --- | --- | --- |
| **Question Number** | **Document Required** | **Prefix required** | **Copy Provided (X)** |
| 4 | Health and Safety Policy signed and recently reviewed, or Appendix A signed and recently dated.  | Question 7.4 |  |
| 5 | CV/Training records of Employee with health and safety responsibilities, or CV of Consultant with health and safety responsibilities | Question 7.5 |  |
| 6 | Training Certificates or Certificates of attendance for employee health and safety training for managers and staff. At least two examples.  | Question 7.6 |  |
| 7 | Evidence of incident reporting system, such as screenshots of online reporting tool, evidence of online reporting tool, or copes if incident report template.  | Question 7.7 |  |
| 10 | **Three** risk assessments, suitably completed, relating to work undertaken as part of this contract.  | Question 7.10 |  |
| 11 | Fire Safety Awareness (or similar fire safety training) training certificates or Certificates of Attendance. At least two examples.  | Question 7.11 |  |
| 12 | If premises used, copy of fire risk assessment (recently reviewed) and evidence of maintenance inspection reports (at least two examples).  | Question 7.12 |  |
| 14 | If first aid training provided, evidence of first aid training certificates for staff (dated within 3 years).  | Question 7.14 |  |
| 15 | If chemicals are used, COSHH risk assessment example provided.  | Question 7.15 |  |

**APPENDIX A**



**West Sussex County Council**

**Contractor Health & Safety Declaration of Intent**

**(Less than 5 Employees)**

**Name of Company: ­­­­­­­­­­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**No of Employees: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Our Declaration of Intent is:**

* To provide adequate control of health & safety risks arising from our work activities that may affect our employees, Local Authority employees or members of the public.
* To consult with our employees on matters affecting their health & safety.
* To provide and maintain safe plant, equipment & safe working procedures.
* To ensure safe handling and use of substances (COSHH).
* To provide information, instruction and supervision for our employees.
* To ensure our employees are trained and competent to undertake their tasks.
* To provide necessary health & safety information to WSCC employees and members of the public.
* To prevent cases of work-related ill health, prevent accidents and maintain a safe place of work and a healthy working environment.
* To ensure sufficient funds are available to implement these requirements.
* To review and revise this declaration as necessary (at least every 12 months)

Signature of person with executive responsibility for health & safety:

**Printed Name**: **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Date of Declaration**: **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**