

CDM Co-ordination Evidence of Competence

Criteria I - Policy

May 2012

Stage I

A copy of our current health and safety policy is included in Appendix I to this document.

Criteria 2 - Arrangements

Details of our general arrangements for the management of health and safety are included in our current health and safety policy.

Our arrangements for the role of CDM Co-ordinator are detailed in the flow chart which can be found in appendix 2 to this document

Criteria 3 - Competent Source of Advice

As an organisation made of primarily of safety professionals we are our own source of health and safety advice. Our competence is maintained by continuous CPD and assisted by Corporate membership of the Association of Project Safety and the Construction Health and Safety Group Chertsey.

Criteria 4 - Training and Information

Safetymark have an ongoing training programme. All consultants attend either the Association of Project Safety or the CIRIA course for CDM Co-ordinators. At least 3 days CPD is attended each year by each consultant. This is in addition to regular attendance at APS and CHSG seminars throughout the year. Details of all major courses attended can be found of the CV's for each consultant which can be found in Appendix 3 of this document.

Criteria 5 - Individual Qualifications and Experience

Please see the CV's for each consultant in Appendix 3 of this document.

Criteria 6 - Monitoring, Audit and Review

Details of our procedures for monitoring, audit and review of our safety management arrangements can be found in our current health and safety policy which is included in Appendix I to this document

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Criteria 7 - Workforce Involvement

As a relatively small organisation comprising mainly of safety professionals, all employees and consultants are involved in the development and update of our health and safety and management procedures. Because of the nature of what we do our procedures are under continual review.

Criteria 8 - Accident Reporting & Enforcement Action

Our accident reporting procedures can be found in our health and safety policy.

We are please to report that we have never had either a reportable accident, an enforcement notice or a prosecution.

Criteria 9 - Sub contracting procedures

The competence of all sub contract consultants and contractors is verified against the standards set out in Appendix 4 or 5 of the Approved Code of Practice to the Construction (Design and Management) Regulations 2007. No person starts work for the company until the managing director has verified that they meet the required levels of competence for the work they will be undertaking.

Criteria 14 - CDM Co-ordinator Duties

Our methodology and approach are included in appendix 4 of this document.

Stage 2

May 2012

Criteria I - Work Experience

Details of our work experience can be found in Appendix 5 of this document



CDM Co-ordination

Appendix I - Health & Safety Policy

May 2012

CDM-C

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PROFESSIONALISM WITH INTEGRITY



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Version 4 Issued 4th May 2012



Health and Safety Policy and Procedures

for

Armfield Project Management Ltd

trading as



Version 4 Issued: 4th May 2012



DOCUMENT CONTROL

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1. POLICY

This is the Health and Safety Policy for Armfield Project Management Ltd t/a Safetymark Consultancy Services and shall be implemented in all our undertakings.

In all our activities and operations, we will work with our staff, its representatives, our contractors and suppliers to:

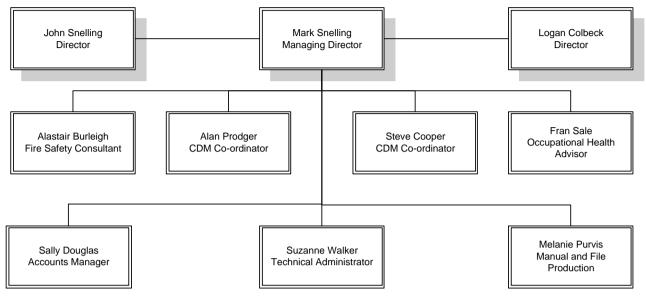
- Comply fully with all legal requirements and meet or exceed our health and safety expectations.
- Provide a secure working environment by protecting ourselves, our assets and our operations against risk of injury, loss or damage and thereby protecting our business.
- Ensure that all our employees, contractors and others are well informed, well trained, engaged and committed to the health and safety improvement process. We recognise that safe operations depend not only on technically sound plant and equipment but on competent people and an active health and safety culture, and that no activity is so important that it cannot be done safely;
- Regularly provide assurance that the processes in place are working effectively. While all apm employees and contractors are responsible for health and safety performance, line management is accountable for understanding and managing health and safety risks;
- Fully participate in hazard identification and risk assessments, risk management, and reporting of health and safety results;
- Maintain public confidence in the integrity of our operations. We will openly report our performance and consult with people outside the company to improve our understanding of external and internal health and safety issues associated with our operations;
- Expect that all parties working on Safetymark Consultancy Services behalf recognise that they can impact our operations and reputation, and must operate to our standards. We will assure ourselves that our contractors' and others' management systems are compatible with our commitment to health and safety performance.

Mark Snelling Managing Director April 2011

Mark Sudling



2. ORGANISATION



2.1 Responsibility for Safety within the Company

- a) Mark Snelling the Managing Director will be responsible for the overall effectiveness of the company's health and safety policy. Every employee is to co-operate with him on all matters of safety and health and for complying with legal requirements in their own jobs.
- b) Whilst the overall responsibility for health and safety rests at the highest level, individuals at every other level will need to accept degrees of responsibility in order to effectively implement the policy.
- c) The following procedures detail the responsibility at each management level in support of implementation of the policy.

2.2 Managing Director

- a) Has overall responsibility for health and safety matters within the company and will ensure that action is taken to prevent any employees being put at risk whilst they are in the company's employ.
- b) Shall ensure that the necessary funding is available to fulfil the requirements of this policy and any future health and safety requirements in full, in line with his legal and moral duty to do so.
- c) Shall monitor and review the resources necessary to comply with this policy.
- d) Shall ensure that this health and safety policy is enforced.
- *e)* Shall ensure that the company and its employees comply with all requirements of *the Health and Safety at Work Act 1974*, this policy and any risk assessments for work to be carried out.
- f) Shall review health and safety procedures, if comments or recommendations are received at any time from any employee.



- g) Shall complete an accident report form for accidents involving injury or lost time.
- h) Shall ensure that all 'reportable accidents' as defined by the by the *Reporting of Injuries*, *Diseases or Dangerous Occurrences Regulations 1995* are reported in the defined time span to the Health and Safety Executive.
- *i)* Shall ensure that adequate information, instruction and training is given to employees as required by the *Health and Safety at Work Act 1974.*
- j) Shall ensure that there are adequate first aiders and facilities and that employees know their whereabouts.
- k) Shall complete, where necessary, a risk assessment for any hazards identified and shall ensure that appropriate measures are taken to reduce or eliminate the risks identified in the assessment. Shall ensure control measures are communicated to all those who may be affected. Shall ensure that training is given where identified.
- I) Shall complete, where necessary, an assessment of any hazardous substances in use within the company, and shall ensure that appropriate measures are taken to reduce or eliminate the risks as identified in the assessment. Shall ensure that these measures are communicated to all those who may be affected and training is given where identified.
- m) Shall carry out assessment of all hazardous manual handling operations, and ensure that appropriate measures are taken to avoid, reduce or eliminate the risks as identified. Shall ensure that all measures identified to reduce risk are communicated to all those who may be affected. Shall ensure that manual handling training is given where identified.
- n) Shall ensure that personal protective equipment is available and used by employees, wherever it is required by law, this safety policy or its use indicated in any assessments.
- o) Shall carry out regular health and safety inspections and ensure that findings are recorded and all necessary remedial action taken.
- p) Shall ensure that adequate supervision is available at all times, particularly where young and inexperienced workers are concerned.
- q) Shall communicate to all those who may be affected, control measures for risks identified in assessments received from contractors carrying out work on company premises.
- r) Shall monitor implementation of control measures, for risks identified in assessments received from contractors carrying out work on company premises.



2.3 The Company Employees

- a) Shall make themselves familiar with, and conform to this Health and Safety Policy at all times.
- b) Shall observe all safety rules at all times, and act on all instructions given by the Managing Director on all matters of health and safety. Refusal to comply is a disciplinary matter.
- c) Shall wear the appropriate personal protective equipment wherever it is required by law, the Company, this Health and Safety Policy or its use indicated in a risk assessment.
- d) Shall report all accidents and damage to the Managing Director, whether persons are injured or not.
- e) Shall immediately report any defects in protective equipment issued, to the Managing Director.
- f) Are welcome, and encouraged to, discuss safety matters with the Managing Director.
- g) Shall report any defects in buildings or equipment to the Managing Director. In no circumstances must they carry out any repairs without instruction.
- h) Shall not lift any heavy object, unless trained to do so and capable of lifting the object. If in doubt, the Managing Director must be contacted to assess the risk and make alternative arrangements if necessary.



2.4 Company Employees/Consultants Working for other Companies

- a) Shall ensure that they obtain a copy of their host companies health and safety policy.
- b) Shall ensure that they received induction training from their host company. This training should include:
 - i) Identification of management
 - ii) An explanation of their duties under the company's health and safety policy.
 - iii) An explanation of employee duties under the Health and Safety at Work Act and all other relevant statutory provisions.
 - iv) Fire and emergency procedures training, including:
 - How to raise Alarm
 - Sound of Alarms
 - Assembly points
 - Evacuation routes and procedures
 - Use of fire fighting equipment
 - Correct use of fire doors
 - v) Location of First Aiders and First Aid Boxes.
 - vi) Where relevant Display Screen Training and Workstation Assessment.
- c) Shall ensure that they comply with all conditions imposed by the Health and Safety Policy of their host company.
- d) Shall report all accidents to the Managing Director, whether they are injured or not.
- e) Should they not receive a copy of the companies Health and Safety Policy or receive induction training, shall report this immediately to the Managing Director.
- f) Are welcome, and encouraged to, discuss safety matters with the Managing Director.

2.5 Visitors

- a) Shall observe all company safety rules.
- b) Shall comply with all instructions given by persons enforcing this company health and safety policy.
- c) Shall not work on the premises until the relevant safety rules are read, understood and accepted.
- d) Shall not work on the premises until covered by insurance against risk.
- e) Shall observe the company rules and regulations for contractors.



2.6 Persons carrying out work on Company Premises

- a) Shall comply with the requirements of this health and safety policy.
- b) Shall, if they employ more than 5 people, submit to the Managing Director before work starts, a copy of their company health and safety policy.
- c) Shall submit to the Managing Director before work starts, risk assessments for all hazardous works to be carried out on company premises. Particularly where that work may put company employees at risk.
- d) Shall submit to the Managing Director before work starts, assessments for all hazardous substances to be used on company premises that cannot be replaced with safer alternatives. Particularly where that work may put company employees at risk.



3. ARRANGEMENTS

3.1 Risk Assessments

- a) In line with the *Management of Health and Safety at Work Regulations 1999 (as amended)* suitable and sufficient assessment must be made of both the risks to the health and safety of employees whilst they are at work and the risks to health and safety of persons not in the company's employment but arising out of or in connection with the companies work.
- b) These assessment will be reviewed periodically to ensure they are still valid and whenever there has been significant changes to the safe system of work outlined.
- c) The Risk Assessment must:
 - i) Identify all hazards or risks.
 - ii) Identify and prioritise measures to be taken to comply with statutory legislation.
 - iii) Set out a formal and clear management system as required, establishing responsibility for the management functions of planning, organisation, control and monitoring.
 - iv) Set out a safe system of work that:
 - avoids risks altogether.
 - deals with problems at source.
 - reduces risk by adapting work to suit the individual.
 - makes use of available technology to provide a safe system of work.
 - provides a protected workplace.
 - as a last resort, if other methods are not reasonably practicable, use of personal protective equipment.
 - v) Detail any training or information required by the person carrying out the task.
 - vi) Detail precautions to be taken to protect others that may be affected by the work.
 - vii) Be communicated to the personnel involved
- d) Risk assessments will be carried out by a competent person appointed by the Managing Director.
- e) The safe systems of work identified in the risk assessments must be implemented, communicated to the personnel involved and monitored by the Managing Director.



3.2 COSHH Assessments

- a) In line with the Control of Substances Hazardous to Health Regulations assessment shall be made of all hazardous substances to be used by the company.
- b) "substance hazardous to health" means a substance (including a preparation):
 - i) which is listed in Part I of the approved supply list as dangerous for supply within the meaning of the CHIP Regulations and for which an indication of danger specified for the substance is very toxic, toxic, harmful, corrosive or irritant:
 - ii) for which the Health and Safety Commission has approved a workplace exposure limit;
 - iii) which is a biological agent;
 - iv) which is dust of any kind, except dust which is a substance within paragraph (i) or
 (ii) above, when present at a concentration in air equal to or greater than 10 mg/m³, as a time-weighted average over an 8-hour period, of inhalable dust, or 4 mg/m³, as a time-weighted average over an 8-hour period, of respirable dust;
 - v) which, not being a substance falling within sub-paragraphs (i) to (iv), because of its chemical or toxicological properties and the way it is used or is present at the workplace creates a risk to health.
- c) COSHH assessments must:
 - i) Assess the Hazards and Risks to Health
 - ii) Set out the control program
 - Avoid use of substance
 - Substitute safer materials for hazardous ones
 - Provide Engineering controls (Exhaust ventilation, dust extraction)
 - Select work practices to reduce risk (Use brush rather than spray)
 - The use of Personal Protection Equipment where long term solutions are impractical
- d) If there is a recognisable health risk, inform, instruct and train persons likely to be affected, about risks and control measures and the reasons for them.
- e) COSHH assessments will be carried out the Managing Director.
- f) Safe systems of work identified in the risk assessments will be implemented, communicated to the personnel involved and monitored by the Managing Director.



3.3 Dangerous Substances and Explosive Atmospheres

- a) Dangerous substances are classified as:
 - i) a substance or preparation which meets the criteria in the approved classification and labelling guide for classification as a substance or preparation which is explosive, oxidising, extremely flammable, highly flammable or flammable, whether or not that substance or preparation is classified under the CHIP Regulations;
 - ii) a substance or preparation which because of its physico-chemical or chemical properties and the way it is used or is present at the workplace creates a risk, not being a substance or preparation falling within subparagraph (a) above; or
 - iii) any dust, whether in the form of solid particles or fibrous materials or otherwise, which can form an explosive mixture with air or an explosive atmosphere, not being a substance or preparation falling within subparagraphs above;
- b) Due to the nature of our business it is unlikely that we will need to use dangerous substances in any significant quantities if at all. The company shall therefore where ever practicable avoid the need for the use of dangerous substances.
- c) The Managing Director shall where it is not practical to avoid the use of a dangerous substances ensure:
 - that suitable and sufficient assessment is made where a dangerous substance is or is liable to be present in a workplace occupied by the company of the risks to company employees which arise from that substance;
 - ii) that sufficient competent persons are appointed to carry out any necessary assessments;
 - iii) that any employee who is required to undertake a risk assessment or implement any control measures identified by a risk assessment are provided with sufficient information, instruction, and training to enable them to undertake their duties.
- d) Dangerous substance risk assessments shall be reviewed regularly so as to keep them up to date particularly if:
 - i) there is reason to suspect that the risk assessment is no longer valid; or
 - ii) there has been a significant change in the matters to which the risk assessment relates including when the workplace, work processes, or
 - iii) organisation of the work undergoes significant changes, extensions or conversions;
 - iv) and where, as a result of the review, changes to the risk assessment are required, those changes shall be made.



- e) Hazardous and Dangerous Substance assessment shall *include consideration of*.
 - i) the hazardous properties of the substance;
 - ii) information on safety provided by the supplier, including information contained in any relevant safety data sheet;
 - iii) the circumstances of the work including:
 - the work processes and substances used and their possible interactions;
 - the amount of the substance involved;
 - where the work will involve more than one dangerous substance, the risk presented by such substances in combination; and
 - the arrangements for the safe handling, storage and transport of dangerous substances and of waste containing dangerous substances;
 - iv) activities, such as maintenance, where there is the potential for a high level of risk;
 - v) the effect of measures which have been or will be taken pursuant to the Dangerous Substances and Explosive Atmospheres Regulations 2002;
 - vi) the likelihood that an explosive atmosphere will occur and its persistence;
 - vii) the likelihood that ignition sources, including electrostatic discharges, will be present and become active and effective;
 - viii) the scale of the anticipated effects of a fire or an explosion;
 - ix) any places which are or can be connected via openings to places in which explosive atmospheres may occur; and
 - x) such additional safety information as the employer may need in order to complete the risk assessment.
- f) Where a risk is identified the company shall ensure that it is either eliminated or reduced so far as is reasonably practicable by replacing it with a substance or process which either eliminates or reduces the risk.
- g) Where it is not reasonably practicable to eliminate risk the company shall, so far as is reasonably practicable, apply measures, consistent with the risk assessment and appropriate to the nature of the activity or operation:
 - i) to control risks; and
 - ii) to mitigate the detrimental effects of a fire or explosion or the other harmful physical effects arising from dangerous substances.



- h) The following measures are, in order of priority, those to be implemented to control risk:
 - i) the reduction of the quantity of dangerous substances to a minimum;
 - ii) the avoidance or minimising of the release of a dangerous substance;
 - iii) the control of the release of a dangerous substance at source;
 - iv) the prevention of the formation of an explosive atmosphere, including the application of appropriate ventilation;
 - v) ensuring that any release of a dangerous substance which may give rise to risk is suitably collected, safely contained, removed to a safe place, or otherwise rendered safe, as appropriate;
 - vi) the avoidance of ignition sources including electrostatic discharges; and adverse conditions which could cause dangerous substances to give rise to harmful physical effects; and
 - vii) the segregation of incompatible dangerous substances.
- i) The following measures are, in order of priority, those to be implemented to mitigate the detrimental effects of a fire or explosion or the other harmful physical effects:
 - i) the reduction to a minimum of the number of employees exposed;
 - ii) the avoidance of the propagation of fires or explosions;
 - iii) the provision of explosion pressure relief arrangements;
 - iv) the provision of explosion suppression equipment;
 - v) the provision of plant which is constructed so as to withstand the pressure likely to be produced by an explosion; and
 - vi) the provision of suitable personal protective equipment.
- j) The Managing Director shall:
 - i) ensure that control measures or safe systems of work identified in risk assessments are implemented and communicated to all employees and other people who may be affected by the risk.
 - ii) monitor the implementation of all control measures identified in the risk assessment.
 - iii) arrange for the safe handling, storage and transport of dangerous substances and waste containing dangerous substances.
 - iv) ensure that any conditions necessary pursuant to Dangerous Substances and Explosive Atmospheres Regulations 2002 for ensuring the elimination or reduction of risk are maintained.
- k) All assessments shall be recorded and a copy maintained by the Directors, Managers and Supervisors responsible.



3.4 Manual Handling Assessments

- a) The Managing Director shall, so far as is reasonably practical, ensure that any manual handling operation which involves a risk of injury to employees is avoided by:
 - i) removing the need for the operation to be carried out;
 - ii) automating or mechanising the operation.
- b) Due to the nature of our business it is unlikely that we will need to undertake any manual handling operation which involves a risk of injury to employees. If there is any risk of injury associated with the lifting task you are confronted with do not undertake it and consult the Managing Director for further guidance.
- c) Where it is not reasonably practical to avoid such an operation the Managing Director shall ensure that:
 - i) a suitable and sufficient assessment is made of the operation;
 - ii) appropriate steps are taken to reduce the risk of injury to the lowest level reasonably practicable;
 - iii) appropriate steps are taken to provide any employees who undertake any such operations with, so far as is reasonably practicable, information on the load to be handled.
 - iv) risk assessments are reviewed if they are no longer valid or there have been significant changes to the safe system of work outlined in the assessment;
 - v) sufficient competent persons are appointed to carry out any necessary assessments;
 - vi) any Company employee who is required to undertake a risk assessment or implement any control measures identified by a risk assessment is provided with sufficient information, instruction, and training to enable them to undertake their duties.
- d) All assessments shall have regard to the factors specified in column 1 of Schedule 2 to the Manual Handling Operations Regulations 1992. and consider the questions specified in the corresponding entry in column 2 of the schedule.
- e) The Managing Director shall ensure that all employees who are required to undertake a manual-handling operation are physically capable and competent to carry out the work and where relevant have received appropriate manual-handling training.
- f) Assessed operations shall not be undertaken until the safe system of work and all relevant information on the load has been communicated to all those who will be involved in the operation.
- g) If any employee carrying out a manual-handling operation for, or on behalf of the company, is injured or becomes ill as a direct result of the operation they shall:



- i) advise their General Practitioner;
- ii) report the matter to the Managing Director;
- iii) ensure that it is reported in accordance with the company's accident reporting procedures.
- h) Manual handling training where provided shall be undertaken by a person competent to give such training, and shall include:
 - i) how to recognise a hazardous load;
 - ii) how to deal with an unfamiliar load;
 - iii) the proper use of handling aids and personal protective equipment;
 - iv) features of the working environment that contributes to safety;
 - v) the importance of good housekeeping;
 - vi) factors affecting individual capacity;
 - vii) good handling techniques.



3.5 Display Screen Equipment

- a) The Managing Director shall so far as is reasonably practicable:
 - i) ensure that suitable and sufficient analysis is carried out of all work stations which are used by display screen equipment users (user means an employee who habitually uses display screen equipment as a significant part of his normal work) or operators, for the purpose of assessing the health and safety risks to which those persons are exposed in consequence of that use;
 - ii) take all necessary steps to reduce the risk identified to the lowest level reasonably practicable;
 - iii) ensure that all work stations on the firm's premises used by display screen equipment users or operators, comply with the requirements of the Health and Safety (Display Screen Equipment) Regulations 1992.
- b) The Managing Director shall provide, if requested, all employees who habitually use display screen equipment as a significant part of their normal work with an appropriate eyesight test, prior to their employment and at regular intervals after they have become a user.
- c) Where display screen users experience visual difficulties which may reasonably be considered to be caused by work on display screen equipment the company shall:
 - i) meet the cost of a basic pair of spectacles where these are required specifically for working with display screen equipment. (Any additional cost to be contributed by the work station user);
 - ii) take steps to incorporate changes of task for display screen users, to prevent intensive periods of on-screen activity;
- d) The Managing Director shall provide sufficient information, instruction, and training necessary to ensure the health and safety of all employees who are users display screen equipment.
- e) The Managing Director shall ensure that all DSE users are provided with:
 - i) a chair that is stable, adjustable in height and back and has wheels;
 - ii) a foot rest if required;
 - iii) a screen that is free from flicker and glare.
- f) Users when using DSE shall:
 - i) Keep sufficient space in front of the keyboard to provide support for hands and arms
 - ii) Take regular breaks from the screen



3.6 Fire and Emergency

- a) Management
 - i) The Managing Director is the responsible person as defined in the Regulatory Reform (Fire Safety) Order 2005.
 - ii) The Managing Director shall ensure that a fire risk assessment is carried out of that all areas under the company's control every 12 to 14 months and following any building works or office moves.
 - iii) Fire risk assessments shall be carried out by the Managing Director and include an assessment of the risks to persons with restricted mobility, hearing, vision or other special needs. All fire risk assessments shall be recorded and a copy maintained.
 - iv) The Managing Director shall ensure that a fire and emergency plan is produced for the office, which takes into consideration the needs of persons who work at the location and have restricted mobility, hearing, vision or other special needs.
 - v) The Managing Director shall ensure that the following information is displayed on the company health and safety notice board:
 - the fire action notice;
 - the location of the evacuation assembly point;
 - names of those responsible for controlling any evacuation or emergency response.
 - vi) Evacuation procedures shall in co-operation with other tenants within the building be tested at least once a year.
 - vii) The Managing Director shall provide all employees with adequate fire safety training to allow them to act up the requirements of companies fire safety plan.



- b) Raising the Alarm
 - i) In the event of discovering a fire or smelling smoke you must raise the alarm immediately by shouting fire, fire, fire.
 - ii) If safe to do so, provide details by telephone to the fire services (dial 999). Ideally leave the building and use a mobile telephone to make the call. Ensure that occupants of the shop at the front of the building and anybody in the ECOEPC office are aware of the risk and are also evacuating.
- c) In case of fire or emergency requiring evacuation from the building
 - i) You must leave the building immediately by the nearest exit route, closing all doors and windows as you go.
 - ii) If you are the last to leave, shout to make sure everyone has left, and close all fire doors behind you. Please knock on toilet doors to make sure that no one is unaware of the fire. Do not however put yourself at risk.
 - iii) Do not stop to pick up personal belongings that are not readily available.
 - iv) On leaving the building go immediately to the assembly point which is located outside the main gates of Claygate Youth Centre.
 - v) Do not leave the assembly point until a roll call has been taken and everybody has been accounted for.
 - vi) Do not attempt to fight the fire unless you are a designated person and are trained to do so.
 - vii) The Managing Director or most senior member of staff present shall:
 - be the central point of contact at the assembly point and everyone should report to them on arrival;
 - take a mobile phone to the assembly point and if the alarm has not been raised before leaving the building shall call the emergency services
 - take a roll call at the assembly point, and report any missing persons to the emergency services upon their arrival.
- d) Fire Fighting
 - i) Only personnel trained in the use of fire fighting equipment should attempt to fight a fire and then only if it does not put them at risk.
 - ii) Before fighting any fire ensure that your exit is clear.
 - iii) Never fight a fire alone.
 - iv) If you believe you are in any danger leave the building immediately and go to the evacuation point.



3.7 Training

- a) The Managing Director shall ensure that all relevant requirements of this policy are communicated to and understood by all employees. Employees shall also be kept informed of any changes to this policy.
- b) The Managing Director shall ensure that employees are provided with adequate health and safety training:
 - i) on their being recruited into company's undertaking; and
 - ii) on their being exposed to new or increased risks because of:
 - their being transferred or given a change of responsibilities within the company;
 - the introduction of new work equipment into or a change respecting work equipment already in use within the company;
 - the introduction of new technology into the company, or
 - the introduction of a new system of work into or a change respecting a system of work already in use within the company.
- c) Training shall be repeated periodically where appropriate; adapted to take account of any new or changed risks to the health and safety of the employees concerned; and take place during working hours.



- d) Induction training shall always be given to new employees and shall include:
 - i) employers and employee statutory duties and responsibilities;
 - ii) the requirements of this health and safety policy;
 - iii) the names of all duty holders and in particular:
 - Director responsible for safety (Managing Director);
 - the company's competent source of health and safety advice (Managing Director);
 - the appointed persons / first aiders;
 - those responsible for controlling any evacuation or emergency response.
 - iv) Fire safety awareness and the action to take in case of fire or emergency;
 - v) what to do in case of an accident and how to summon first aid;
 - vi) accident/near-miss reporting procedures;
 - vii) manual handling;
 - viii) office safety;
 - ix) personal safety and lone working;
 - x) safe use of display screen equipment
 - xi) health risks, signs, symptoms and reporting;
 - xii) stress/wellbeing at work
- e) The Managing Director shall carry out or arrange to be carried out, job specific training on any item of new equipment that an employee shall use during the course of their employment.
- f) Records shall be kept by the Managing Director of all health and safety training received by employees.



3.8 Accident reporting

- a) All accidents involving employees or subcontractors working for the company shall be reported as soon as practicable to the Managing Director or in his absence another Director. The person to whom the accident reporting shall ensure that the following information is entered into the accident book (BI 510) held at the companies head office:
 - i) full name and address of the injured person;
 - ii) occupation of the injured person;
 - iii) date of entry;
 - iv) date and time of accident;
 - v) accident details the location and circumstances, work, process etc;
 - vi) injury details and treatment given;
 - vii) signature of the person making entry.
- b) A copy of the accident record will be given or posted to the employee and a copy maintained in a secure location for a period of 40 years from the date of the accident.
- c) Where an accident is reportable under Reporting Of Injuries, Diseases and Dangerous Occurrences Regulations 1995 (R.I.D.D.O.R) the Managing Director shall ensure that it is reported to the Health and Safety Executive as set out in the regulations.

3.9 Accident Investigation

- Accident investigation shall follow the principals set out in 'HSG245 Investigating accidents and incidents - a workbook for employers, unions, safety representatives and safety professionals'
- b) The Managing Director will investigate all accidents, whether injury producing or otherwise where the potential consequences could have been significant, there is a likelihood of the adverse event recurring or the accident would appear to be part of a trend.
- c) Where the accident investigation identifies the need for remedial action this will be adequately funded and implemented quickly.



3.10 First Aid Arrangements

- a) Action is case of emergency or illness
 - i) Fire safety arrangements are co-ordinated with the Complimentary Health Partnership who occupy the shop at the front of the building. The Complimentary Health Partnership have a qualified first aider on duty between 08.00 and 20.00 weekdays who should be summoned should the need arise.
 - ii) Assistance can also be sought from the Capelfield Surgery at the other end of Elm Road by calling 01372 462501 however if there is a real emergency diall 999.
 - iii) The main first aid box can be found in the main reception of the Complimentary Health Partnership. A smaller box is available for out of hours use in the kitchen.
- b) Management
 - i) The Managing Director shall in co-ordinated with the Complimentary Health Partnership ensure that a first aid plan is produced for the building that identifies:
 - what equipment, facilities and personnel are required to enable first-aid to be rendered to all employees who become injured or become ill at work;
 - the means by which help can be summoned when a person becomes injured or ill at work;
 - how employees shall be informed about the arrangements that have been made in connection with the provision of first-aid, including the location of equipment, facilities and personnel.
 - ii) The plan shall be based upon an assessment of:
 - the risks to which employees may be exposed;
 - the number of employees;
 - the distance of the location from any medical and/or emergency support that may be required.
 - The equipment, facilities and personnel provided should be adequate and appropriate to:
 - preserving life and minimise the consequences of injury or illness until help from a doctor or nurse is obtained;
 - treat minor injuries, which would otherwise receive no treatment or which do not need treatment by a doctor or nurse.
 - iii) All personnel shall be made aware of the location of the nearest first aid box and the name of the Appointed Person in case of an emergency.
 - iv) Records and dates must be kept by the Managing Director of the qualifications of all appointed persons.



- c) First Aid Kits
 - i) As a minimum requirement first aid boxes must contain:
 - One guidance card
 - Twenty individually wrapped sterile adhesive dressings (assorted sizes) appropriate to the work environment.
 - Two sterile eye pads, with attachments.
 - Six individually wrapped triangular bandages
 - Six safety pins
 - Six medium sized individually wrapped un-medicated wound dressings (approx. 10cm x 8cm)
 - Two large sterile individually wrapped un-medicated wound dressings (approx. 13cm x 9 cm)
 - Three extra large sterile individually wrapped un-medicated wound dressings (approx. 28cm x17.5cm)
 - ii) First aid boxes will be provided and kept fully stocked in the main reception of the Complimentary Health Partnership, the kitchen and all company vehicles.
 - iii) The Managing Director must ensure that the office first aid box is regularly inspected and restocked as necessary.

3.11 Work at Height

- a) Work at height shall be avoided where ever practicable. If the task is not essential to our role as CDM Co-ordinator or Health and Safety Consultant do not undertake it.
- b) If a company employee is required to work at height as part of an inspection, such work where it cannot be undertaken from an inherently safe area e.g. a roof with a suitable parapet or guardrail to all edges, shall be undertaken from a suitable working platform compliant with current UK legislation and guidance.
- c) The company does not own and will not hire access equipment. Where access equipment is required it shall be provided by the client or the principal contractor. The employee shall however ensure before using any work equipment that:
 - i) It is appropriate for the task to be undertaken;
 - ii) it has been checked by a competent person that day for damage, faults and wear;
 - iii) it has been inspected by a competent person at appropriate intervals;
 - iv) they have undertaken with the owner of the equipment a suitable risk assessment;
 - v) they understand the risks, the controls and the emergency procedures.
- d) Employees shall ensure that each individual place at which work is to be done at height is checked by a competent person on every occasion before that place is used.



- e) Access by Mobile Elevating Work platforms shall only be undertaken when accompanied and supervised by a trained and competent operator and only after having been briefed on the risks, the controls and the emergency arrangements.
- f) Except where used as access to a safe working platform the use of ladders prohibited.
- g) The use of steps is prohibited without permission from the Managing Director and then only once a risk assessment has been undertaken. Steps shall only be used for work of short duration where there are no alternative means of access and the features on the site that mean steps must be used. When using steps you must be able to maintain three points of contact (hands and feet) at the working position. Short duration is taken to be no more than 5 minutes.
- h) Before using a podium or steps employees must verify that they area Class 1 'Industrial' or EN 131 ladders or stepladders for use at work, have been checked that day for damage, faults and wear and been inspected by a competent person at periods determined by type, intended use, work conditions, place of use, age and previous use.
- i) All work at height shall be properly planned, appropriately supervised and carried out in a manner which is so far as is reasonably practicable safe. In particular Employees shall ensure that:
 - i) all work at height takes account of weather conditions that could endanger health and safety;
 - ii) those supervising their work at height are trained and competent;
 - iii) the place where work at height is done is safe;
 - iv) equipment for work at height is appropriately inspected;
 - v) the risks from fragile surfaces are properly controlled; and
 - vi) the risks from falling objects are properly controlled.
- j) The company shall ensure that no person engages in any activity for the company, including organisation, planning and supervision, in relation to work at height or work equipment for use in such work unless he is competent to do so. The company shall ensure that all employees required to undertake inspections that may require work at height have received sufficient training to personally assess and control the risks of working at height.



3.12 Personal Protective Equipment (PPE)

- a) All employees who must visit a construction site will be issued with and must carry in their car at all times:
 - i) safety shoes or boots with toe protection;
 - ii) safety helmet;
 - iii) appropriate safety gloves; and
 - iv) safety goggles or visor;
 - v) high visibility jacket;
 - vi) suitable protective equipment for the time of year and weather conditions
- b) Employees shall inspect their Personal Protective Equipment before each use. Equipment found to be defective shall not be used and shall be reported to the Managing Director who shall make arrangement to replace the equipment. Personal Protective Equipment shall also be inspected by the Managing Director every six months and the inspection recorded.
- c) Employees shall notify the Managing Director immediately if any PPE issued to them is lost or damaged so that it no longer provides the necessary protection or creates another hazard.
- d) Employees shall were suitable Head Protection to BS5240 when visiting any construction site unless the Principal Contractor specifically permits head protection not to be worn and **there is no risk of injury to the head** from falling objects or hitting the head against something e.g. during commissioning and handover.
- e) The Managing Director shall ensure that all contractors working under the company's control provide and use personal protective equipment wherever it is required by law, Safetymark, this policy or its use indicated in statutory assessments.



3.13 Work equipment

- a) The Managing Director shall when selecting any work equipment have regard to the working conditions and to the risks to the health and safety of persons which exist in the premises in which the work equipment shall be used and any additional risk posed by the use of the equipment. He shall ensure that all work equipment selected or used by company employees is so constructed or adapted as to be suitable for the purpose for which it is provided.
- b) The Managing Director shall ensure that all work equipment is maintained (including cleaning as appropriate) in an efficient state, in efficient working order and in good repair.
- c) The Managing Director shall keep a record of all work equipment owned with details and frequency of any inspection, testing or maintenance required.
- d) Inspection, testing or maintenance shall be undertaken by a competent person in accordance with manufacturers recommendations and a record maintained of the date, the work undertaken and any defects identified.
- e) Defective work equipment shall be taken out of action and either disposed of or clearly labelled and not used until a suitable repair has been undertaken.
- f) Employees shall inspect all work equipment each day before use. Equipment found to be defective shall not be used and shall be reported to the Managing Director who shall ensure that the equipment in question is taken out of service and all necessary tests and repairs carried out.

3.14 Portable and transportable electrical equipment

- a) Portable and transportable electrical equipment shall be inspected, tested and maintained in accordance with the guidance given in HSG107 "Maintaining portable and transportable electrical equipment". The Managing Director shall ensure that all equipment is inspected and where appropriate tested in accordance with the schedules set out in this document.
- b) Only NICEIC registered electricians (<u>http://www.niceic.com/</u>) shall work on any electrical equipment or supplies.
- c) Only Gas safe (<u>http://www.gassaferegister.co.uk/</u>) registered contractors shall work on any gas fittings.



3.15 Maintenance

- a) Employees discovering a defect in the building or equipment must report it to the Managing Director.
- b) Company employees must not attempt to test or maintain their own work equipment unless they are competent and have specifically been authorised to do so.
- c) Any work carried out above floor level must only be carried out from ladders, steps or tower scaffold. Steps will be available for such situations.
- d) Only designated trained staff will be allowed to carry out maintenance work.
- e) Only registered electricians are allowed to work on any electrical equipment or supplies
- f) Only CORGI registered plumbers are allowed to work on any gas appliances or installation.
- g) The building's electricity installations will also be tested every five years. Any defects are to be notified to the Managing Director, who will arrange for the defects to be rectified.

3.16 Housekeeping

- a) All areas are to be kept clean and tidy at all times. All employees have a duty to ensure that hazardous working conditions are not allowed to develop.
- b) The Managing Director shall ensure that all offices, work spaces, toilets and kitchens are kept clean.
- c) All employees have a duty to ensure that all passageways, and escape routes are kept tidy and clear of obstacles.
- d) All employees have a duty to ensure that all fire escape exits are kept clear and unlocked whenever the building is occupied.
- e) All employees must ensure that a high standard of Housekeeping is maintained, by looking after their own areas.



3.17 Smoking Policy

a) No smoking is permitted on company premises.

3.18 Contractors

- a) The Managing Director shall verify by checking on the CHAS database that any contractors or consultant practices who are to be invited to carry out work for, or on behalf of, the company have current CHAS accreditation (<u>http://buyers.chas.gov.uk/default.asp</u>).
- b) Where contractors or consultant practices do not have current CHAS accreditation they shall be asked to provide:
 - i) their current Safecontractor accreditation (www.safecontractor.com); or
 - ii) a document to demonstrate their competence against the standards set out in their evidence Appendix 4 of the Approved Code of Practice to the CDM 2007.

In the case of individual consultants a Curriculum Vitae will be requested.

- c) Where Safecontractor accreditation is provided this will be checked on their online database using the visitor login.
- d) Letter L03 and form can be used to request evidence of competence against the standards set out in their evidence Appendix 4 of the Approved Code of Practice to the CDM 2007
- e) Returned forms, competency submissions and Curriculum Vitae shall be reviewed by a the Managing Director, and contractors or consultant approved, only when the Managing Director is entirely satisfied that they have made adequate provision for health and safety and are competent to carry out the work they will be required to do.
- f) In all cases the Managing Director shall verify that the consultant / contractor is suitable to undertake the work requested before making any appointment.
- g) Contractors and consultants previous work for the company shall be reviewed before reappointment.
- h) Contractors and consultants considered competent will be added to our competency database. The competence of all contractors will be reviewed at least annually.
- i) Individual consultants shall for purposes of health and safety management be treated as company employees.



3.19 Asbestos

- a) Whilst the majority of our work will not present a risk of exposure to asbestos there will be occasions when we are required to undertake inspections of areas where asbestos may be present. In all such circumstances the employee required to undertake the survey shall:
 - i) review the available asbestos records with the client;
 - ii) not undertake the work unless a suitable survey has been undertaken and any risk of exposure to asbestos has been appropriately control.
- b) Where there is any doubt about the suitability of the asbestos survey or controls the matter shall be referred to the Managing Director.
- c) All employees or consultants whose work is likely to involve either exposure to asbestos or advising the client on asbestos related matters or the review of asbestos surveys shall be provided with suitable information, instruction and training at regular intervals so that they are aware of:
 - i) the properties of asbestos and its effects on health, including its interaction with smoking,
 - ii) the types of products or materials likely to contain asbestos,
 - iii) the operations which could result in asbestos exposure and the importance of preventive controls to minimise exposure,
 - iv) safe work practices, control measures, and protective equipment,
 - v) the purpose, choice, limitations, proper use and maintenance of respiratory protective equipment,
 - vi) emergency procedures,
 - vii) hygiene requirements,
 - viii) decontamination procedures,
 - ix) waste handling procedures,
 - x) medical examination requirements,
 - xi) the control limit and the need for air monitoring, and
 - xii) the survey standards are requirements set out in HSG264



3.20 Health surveillance

- a) Health surveillance is a process involving a range of techniques used to detect early signs of work-related ill health among workers exposed to certain health risks; and subsequently acting on the results.
- b) Due to the nature of our normal work health surveillance is not required. However health surveillance may be required should the company become involved in any activity where there is a risk of significant exposure to:
 - i) Hazardous substances such as chemicals, solvents, fumes, dusts, gases etc.;
 - ii) Asbestos;
 - iii) Lead;
 - iv) Noise;
 - v) Vibration;
 - vi) Manual handling.
- c) Should such a situation occur the Managing Director shall as part of the contract setup appoint a competent person undertake a risk assessment in consultation with all employees who may be affected to identify any significant hazards to health that employees may be exposed that require a health surveillance programme.
- d) Health surveillance shall be required:
 - i) if the work is known to damage health in some particular way; and
 - ii) there are valid ways to detect the disease or condition; and
 - iii) it is reasonably likely that damage to health may occur under the particular conditions at work; and
 - iv) surveillance likely to benefit the employee.
- e) The Managing Director shall before employing any person make reasonable enquiries to determine their prior exposure to health hazards and in particular:
 - i) Hazardous substances;
 - ii) Asbestos;
 - iii) Lead;
 - iv) Noise;
 - v) Vibration;
 - vi) Manual handling.
- f) Where there is any indication that a person has been exposed to a significant level of risk in any previous employment, advice shall be obtained from an occupational health professional and where necessary tests undertaken.



- g) Where any work the person is employed to do may make any previous condition worse all necessary steps shall be taken to reduce the risk and where indicated in a health risk assessment health surveillance shall be undertaken.
- h) The Managing Director shall undertake a formal health review with all employees annually. Where any employee reports or shows any signs or symptoms of ill health that may have resulted from exposure whilst at work to a health risk they shall be referred to an appropriate occupational health professional for further Health surveillance or tests.
- i) Managers and employees shall receive appropriate information, instruction and training to enable them to identify straightforward signs and symptoms caused by working with any substances or processes they are likely to encounter in their work.
- j) Employees shall be encouraged to undertake self-checks to look for and report any signs of work-related ill health.
- k) Managers and employees shall, as soon as they become aware of any sign or symptom that could have resulted from exposure to a health risk at work, report the matter to the Managing Director.

3.21 New and Expectant Mothers

- a) The Managing Director shall when notified that one of their female staff is pregnant:
 - i) ensure that a risk assessments is conducted for that staff member, to determine whether the work the employee is expected to do is of a kind which could involve risk, by reason of her condition, to the health and safety of the expectant or new mother or to that of her baby, from any substances, processes or working conditions;
 - ii) take steps to avoid or minimise the risks;
 - iii) monitoring the implementation of measures taken to protect the staff member concerned;
 - iv) ensure records are kept of such risk assessments.
- b) It is recognised that the circumstances of any pregnancy is personal to that staff member and that they may not immediately wish it to be known that they are pregnant. Safetymark would therefore encourage its female staff to report their pregnancy at the earliest opportunity they feel able to do so a risk assessment can be carried out and so exposure to possible hazards controlled.
- c) Where the risks to the new or expectant mother cannot be adequately controlled the company shall, if it is reasonable to do so, and would avoid such risks, alter her working conditions or hours of work.



d) If it is not reasonable to alter the working conditions or hours of work, or if it would not avoid such risk, the company shall, subject suspend the employee from work for so long as is necessary to avoid such risk.

3.22 Safety Inspections

- a) All reasonable action shall be taken to ensure a safe and healthy working environment. This shall be achieved by proper inspections carried out on a regular basis in addition to normal health and safety activities.
- b) Regular inspections of company offices by a competent person appointed by the Managing Director. The results of all inspections shall be recorded and remedial measures actioned within the shortest practical time.

3.23 Consultation with Employees

- a) The company shall ensure that employees are consulted in good time on matters relating to their health and safety at work and, in particular, with regard to:
 - i) the introduction of any measure at the workplace which may substantially affect the health and safety of those employees;
 - ii) the arrangements for appointing or, as the case may be, nominating persons to:
 - assist the company in undertaking the measures he needs to take to comply with the requirements and prohibitions imposed upon him by or under the relevant statutory provisions and fire safety legislation currently in force; and
 - implement procedures to be followed in the event of serious and imminent danger to persons at work
 - iii) any health and safety information the company is required to provide to those employees by or under the relevant statutory provisions;
 - iv) the planning and organisation of any health and safety training that the company is required to provide to those employees by or under the relevant statutory provisions; and
 - v) the health and safety consequences for those employees of the introduction of new technologies into the workplace.
- b) Consultation shall form part of the monthly management review meetings. Meetings shall be chaired by the Managing Director. Attendance of all employees and any regular consultants is compulsory. Minutes will be taken and distributed to all employees and consultants.
- c) The agenda for the monthly management review meetings shall be as follows:
 - i) Review of Accidents and incidents:
 - involving employees and consultants;
 - on projects where we are acting as CDM-C;



- accident investigation reports;
- ii) System and procedural failures;
- iii) Lessons learnt from accidents and failures;
- iv) Report on new legislation and guidance;
- v) New company policy, procedures, letters and guidance;
- vi) Training and CPD;
- vii) Current active projects;
- viii) Critical and Key Issues
- ix) The next months activities

3.24 Health and Safety Information

- a) A health and safety notice board will be maintained in the main office at Claygate.
- b) The following information shall be displayed on the health and safety notice board:
 - i) The companies health and safety policy statement;
 - ii) the approved poster in a readable condition;
 - iii) the names of all duty holders and in particular:
 - the company's competent source of health and safety advice;
 - the first aiders;
 - those responsible for controlling any evacuation or emergency response.
 - iv) The fire and emergency plan for the building
 - v) The first aid arrangements
- c) Key information shall be communicated at the monthly management review meetings.



3.25 Management Review

- a) The company's health and safety management system as recorded in this health and safety policy and the organisation and arrangement set out for implementing the policy shall be reviewed by the Managing Director:
 - i) annually;
 - ii) in the light of accidents, incidents, or failures of systems described in the system.
 - iii) following the introduction of new legislation, codes of practice, guidance and standards.
- b) The views of employees and any comments made clients and contractors shall be taken into account when undertaking a review.
- c) The review shall take into account any accidents that have occurred, the findings of any accident investigations, any audits carried of compliance with the companies procedures undertaken and any the findings of any inspections.
- d) Where necessary the safety management system and any document that comprises the system shall be revised to address any issues identified within a review.

3.26 Audit

a) Compliance with the procedures set out in this policy shall be audited periodically by the Managing Director who shall ensure that any remedial action identified in the report is implemented within an appropriate timetable.



4. CDM-CO-ORDINATION

4.1 Definitions

- a) **Construction Work** Construction work is defined by the *Construction (Design and Management) Regulations 2007* as the carrying out of any building, civil engineering or engineering construction work and includes:
 - i) the construction, alteration, conversion, fitting out, commissioning, renovation, repair, upkeep, redecoration or other maintenance (including cleaning which involves the use of water or an abrasive at high pressure or the use of corrosive or toxic substances), de-commissioning, demolition or dismantling of a structure;
 - ii) the preparation for an intended structure, including site clearance, exploration, investigation (but not site survey) and excavation, and the clearance or preparation of the site or structure for use or occupation at its conclusion;
 - iii) the assembly on site of prefabricated elements to form a structure or the disassembly on site of prefabricated elements which, immediately before such disassembly, formed a structure;
 - iv) the removal of a structure or of any product or waste resulting from demolition or dismantling of a structure or from disassembly of prefabricated elements which immediately before such disassembly formed such a structure; and
 - v) the installation, commissioning, maintenance, repair or removal of mechanical, electrical, gas, compressed air, hydraulic, telecommunications, computer or similar services which are normally fixed within or to a structure,

but does not include the exploration for or extraction of mineral resources or activities preparatory thereto carried out at a place where such exploration or extraction is carried out;

- b) Application of the Construction (Design and Management) Regulations 2007- the provisions of the Regulations apply to and in relation to construction work. The duties under Part 3 of the regulations shall apply only where a project is notifiable and is carried out for or on behalf of, or by, a client.
- c) Notification A project is notifiable if the construction phase is likely to involve more than 30 days; or 500 person days.
- d) **Client** means a person who in the course or furtherance of a business seeks or accepts the services of another which may be used in the carrying out of a project for him; or carries out a project himself.



4.2 Project Inception

a) When the company is appointed as a CDM Co-ordinator in accordance with the CDM Regulations the Managing Director shall appoint a competent person to Lead the project the role on behalf of the company.

4.3 Project Start

- a) Upon appointment the Lead CDM Co-ordinator shall complete an outline Pre Construction Information (PCI) document and in particular part one the notification to the HSE.
- b) The notification shall be sent to the client with letter L04. The letter shall be followed up with a telephone call to arrange a meeting to:
 - i) ensure the client is aware of the legal duties;
 - ii) brief them on their legal duties under CDM 2007 if they are not aware;
 - iii) receive the project brief;
 - iv) agree the management arrangements for the project;
 - v) identify what surveys and information will be needed (where it is possible at that stage to deterine);
 - vi) agree the process and responsibilities for verifying the competence of designers and contractors to be appointed on the project.
- c) The Lead CDM Co-ordinator shall ensure upon completion of the meeting that the PCI document is update to include all information gathered at the meeting and the signed notification is forwarded to the HSE with letter L02.



4.4 Approval of Duty Holders

- a) Where is has been agreed with the client that Safetymark will undertake the vetting of Designers, Principal Contractor or Contractors competence, the Lead CDM Co-ordinator shall verify, by checking the SSIP Forum database (<u>http://www.ssipportal.org.uk/secure/default.aspx</u>) to confirm that the organisation have been accredited to the appropriate level.
- b) The person checking the database must verify that any accreditation is relevant to the duty (Principal Contractor, Designer, Contractor, etc.) the organisation being checked wishes to be appointed for. A contractor will not be deemed competent to act in the role of Principal Contractor unless they have been accredited as a Principal Contractor (accreditation as a contractor is not sufficient).
- c) Where the designers and contractors do not have current accreditation letter L03 and form shall be used to request evidence of their competence against the standards set out in Appendix 4 of the Approved Code of Practice to the CDM 2007.
- d) Returned forms and competency submissions shall be reviewed by the Lead CDM Coordinator, and contractors or consultant approved, only when they are entirely satisfied that the Designer or Contractor have made adequate provision for health and safety and are competent to carry out the work they will be required to do.
- e) Appendix 4 of the Approved Code of Practice to the CDM 2007 shall be the benchmark against which all competency standards are reviewed. When checking the competency of Principal Contractor it is essential that the companies have suitable written arrangements for undertaking the Principal Contractor's duties. Site Managers must have received CITB STMS training or similar to be deemed competent.
- f) Contractors and consultants previous work on projects for our clients shall be considered as part of the review.
- g) All reviews shall be undertaken using form D23 with details given when a section is rejected.
- h) Where a submission is rejected L06A shall be sent along with a pdf copy of the review for.
- Where is submission is deemed acceptable L06 shall be sent to the client confirming that we are satisfied that the Designer or Contractor have demonstrated that they meet the standards set out in Appendix 4 of the Approved Code of Practice to the Construction (Design and Management) Regulations 2007
- j) Contractors and Designer considered competent will be added to our competency database. The competence of all contractors and designers shall be reassessed at least bi annually.



4.5 Pre Construction information

- a) The Lead CDM Co-ordinator shall ensure that the PCI is kept up to date and pre construction information collected as it is produced.
- b) A schedule of existing and available record drawings and information shall be maintained either in the PCI document or on larger projects in a separate register.

Information	Required	Available	Provided	Reference	Title	Location
Health & safety files	✓	×				
Asbestos surveys						
Asbestos management						
procedures						
Rules and information for						
contractors						
Water system schematics						
(Legionella)						
Pressure system schematics						
Fire plan and fire risk						
assessments						
Site plans						
Underground drainage drawings						
Underground services drawings						
As built construction drawings						
As built structural drawings						
As built mechanical services						
drawings						
As built electrical services						
drawings						
Building maintenance manuals						
Mechanical maintenance manuals						
Electrical maintenance manuals						

C)

A schedule of required surveys and investigation reports shall be maintained either in the PCI document or on larger projects in a separate register.

Information	Required	Available	Provided	Reference	Title	Location
Refurb. & Demo. asbestos survey	✓					
Topographical survey						
Soil report						
Soil contamination report						
Underground services						
investigation						
Structural survey						
Stats - electrical						
Stats – drainage						
Stats – water						
Stats – telecoms						



d) The Lead CDM Co-ordinator shall ensure that the PCI document and any associated pre construction information is made available to all designers and contractors appointed on the project. When sent to Designers the PCI shall be sent with L05. When sent to the selected or appointed Principal Contractor the PCI shall be sent with Letter L07.

4.6 Asbestos

a) When construction work is to be undertaken in any building construction before 2000, the pre construction information shall include a refurbishment and demolition survey [for survey details see HSG264 Asbestos- the survey guide]. Where a survey has not already been undertaken the Lead CDM Co-ordinator shall write to the client using letter L04a to request that a survey is undertaken of all areas of the building that may be affected by the works. This shall include the routes of all services and the location of any service connections outside the defined construction area.

4.7 Design of Construction Work

- a) The Lead CDM Co-ordinator shall obtain contact details for all designers from the client and/or the Lead Designer and shall write to them using letter L05 to request inclusion on all design communication.
- b) When acting as CDM Co-ordinator the company shall, take all reasonable steps to ensure:
 - i) that designers comply with their duties under regulations 11 and 18(2);
 - ii) co-operation between designers and the principal contractor during the construction phase in relation to any design or change to a design.
- c) When acting as CDM Co-ordinator the company shall:
 - i) undertake periodic risk review meetings with, so far as is reasonably practicable, all designers involved with a project;
 - ii) maintain a design risk register on each project that details any risk identified either within the meetings or subsequently by a designer or the company.



4.8 Risk Register

a) The risk register shall normally include the following headings

Risktaken to eliminate orthat may affect contractors orby (name)by (date)	•		•		5		0 0			
hazard	Ref	Activity	Hazard	s at	measures taken to eliminate or reduce the	the residual hazards that may affect		required	required	Date actioned

- b) Risk register templates D17a to 17d may be used.
- c) The CDM Co-ordinator shall ensure that the Design Risk Register is kept up to date throughout the project.
- d) The risk register shall be included with the PCI and where appropriate be uploaded onto www.safetybase.co.uk.
- e) The final risk register will be included within the Health and Safety File at the end of the project.

4.9 Tender Approval

a) The CDM Co-ordinator shall, so far as is reasonably practicable ensure that, a Principal Contractor is not appointed until they are satisfied that the contractor is competent to carry out the works and has made adequate provision for health and safety.

4.10 Principal Contractor

- a) The Lead CDM Co-ordinator shall liaise with the Principal Contractor regarding:
 - i) the contents of the health and safety file
 - ii) the information which the principal contractor needs to prepare the construction phase plan, and
 - iii) any design development which may affect planning and management of the construction work.

4.11 Principal Contractors Construction Phase Plan

- a) The Lead CDM Co-ordinator shall when it has been agreed with the client request and review the Principal Contractor's Construction Phase Plan using Letter L08.
- b) Where the plan is not adequate they shall notify the Principal Contractor using Letter L11 providing details of where they feel that it does not comply with the requirement of either the Construction (Design and Management) Regulations 2007 or its associated ACoP. A copy of any such notification shall be sent to the client.
- c) Where the plan is suitable they shall send letter L10 to the client and remind them by telephone of their duty not to permit the construction phase to start until suitable welfare facilities in place on site.



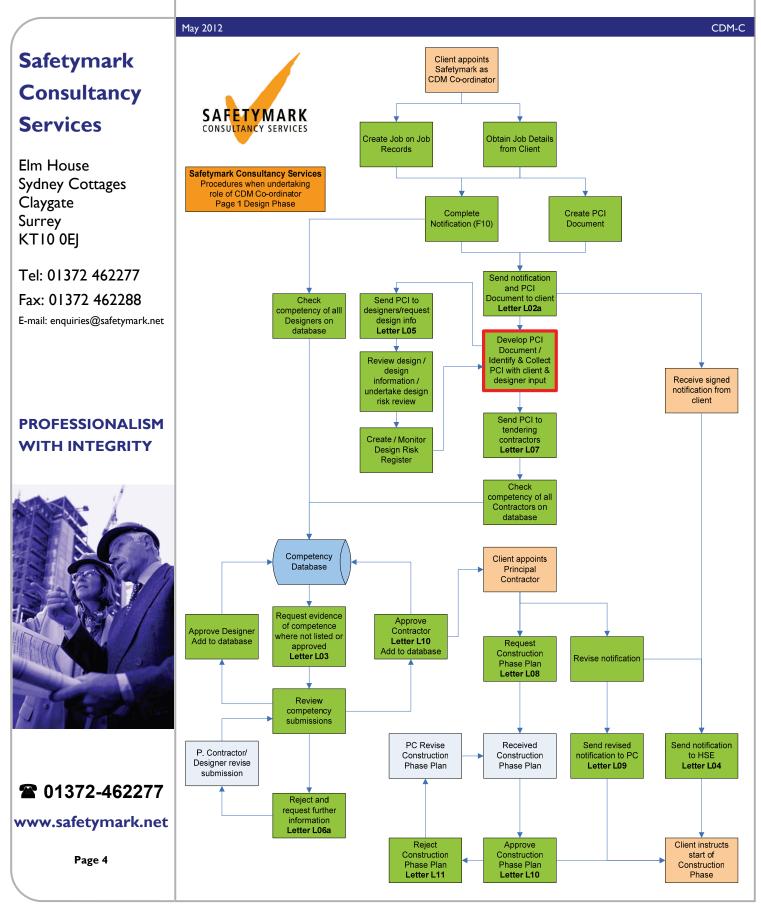
d) When construction work is to be undertaken in any building constructed before 2000, the Lead CDM Co-ordinator shall not write to the client using letter L10 or advise the client in any other way that the construction phase can start unless they have received and saved in the project folder a refurbishment and demolition survey for all areas that may be affected by the works.

4.12 Health and Safety File

- a) The Lead CDM Co-ordinator shall:
 - i) prepare, where none exists, and otherwise review and update a record ("the health and safety file") containing information relating to the project which is likely to be needed during any subsequent construction work to ensure the health and safety of any person; and
 - ii) at the end of the construction phase, pass the health and safety file to the client.
- b) Unless otherwise specified by the client the template D18 shall be used to create health and safety files. The template shall be created at the same time as the pre construction information document and included as an appendix to that document.
- c) The Lead CDM Co-ordinator shall ensure that Letter L12 is sent to the Principal Contractor [PC] 21 days before the planned end of the construction phase to remind then to ensure that all information required for completion of the file is submitted by the date set out in the PCI document.
- d) Where all information is not received by 14 days before the planned end of the construction phase the Lead CDM Co-ordinator shall send letter L13 to the PCI and contact the PC by telephone to remind them that the information is outstanding.
- e) Information provided by the Principal Contractor shall be reviewed using the template D27. Where the information is inadequate L17 shall be sent to the Principal Contractor and L 16 to the client with the review appended as a PDF document.
- f) Where the information has not been received by the due date the Lead CDM Coordinator shall send letter L14 and suspend the contractor on the approved contractors list.
- g) The Lead CDM Co-ordinator shall review all information received for the health and safety file. All suitable information shall be added to the relevant section of the file.
- h) As soon as the file is complete it shall be send by courier with letter L15 to the client.

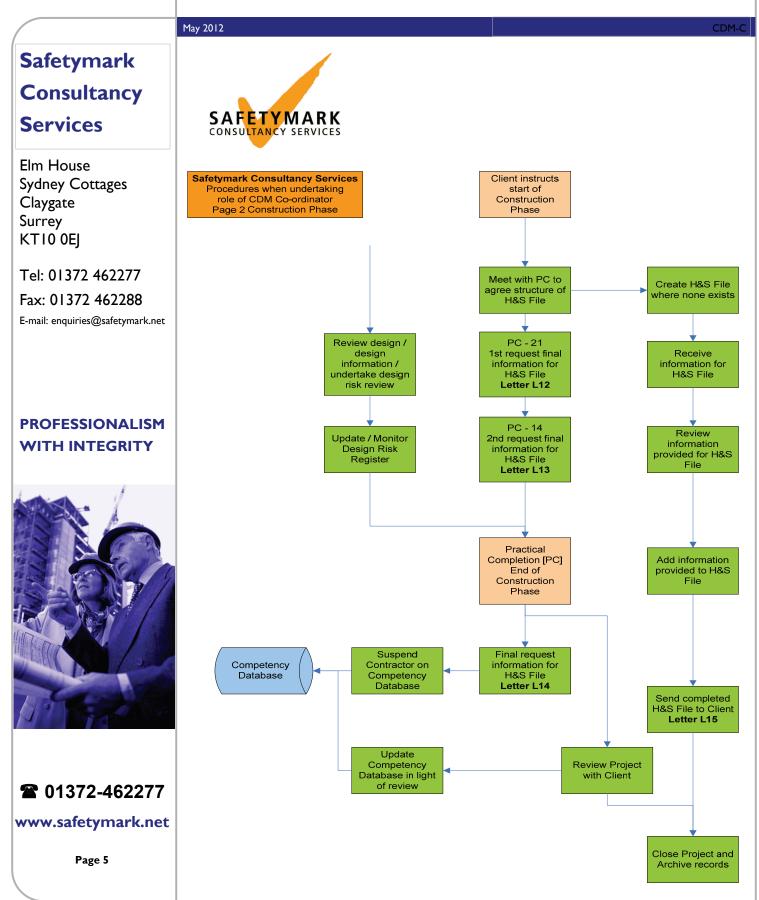


Appendix 2 - Procedures (Part I)



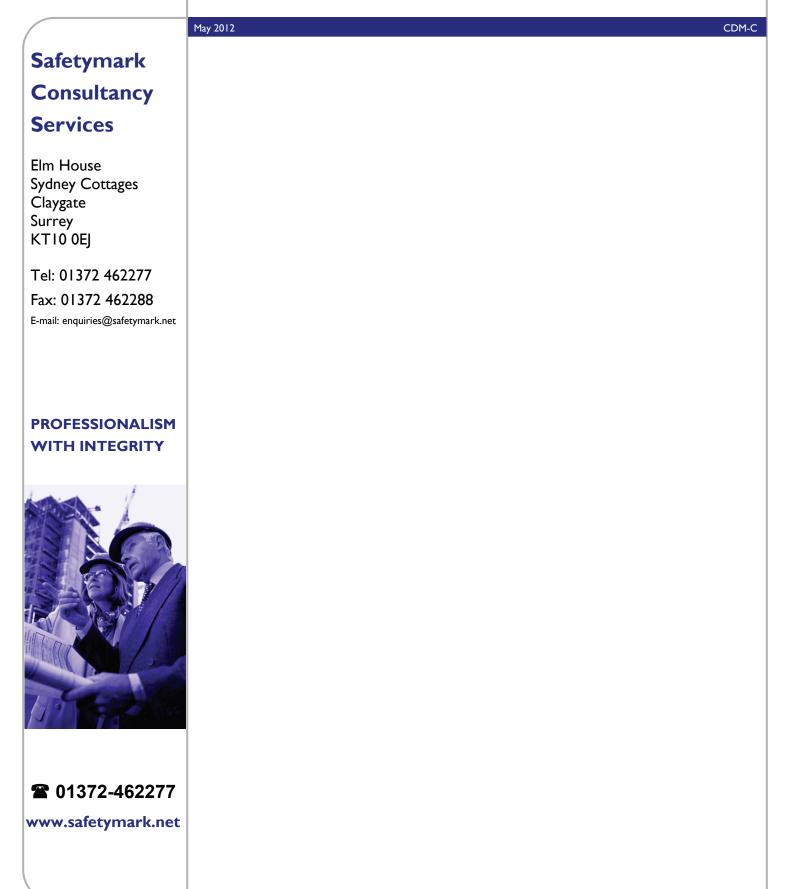


Appendix 2 - Procedures (Part 2)





Appendix 3 - Curriculum Vitae





PERSONAL PROFILE

MARK SNELLING MCIOB, RFAPS, GradIOSH

BACKGROUND

April 1995 to date	Managing Director	Safetymark Consultancy Services
Jan 1989 to April 1995	Construction Contracts Manager	E.R.Armfield Ltd
Nov 1985 to Jan 1989	Construction Site Manager	E.R.Armfield Ltd
July 1984 to Nov 1985	Construction Buyer	E.R.Armfield Ltd

EXPERIENCE

A CDM Co-ordinator and health, safety and fire specialist in construction, healthcare and education. Has significant experience in marine, industrial, commercial, residential, brewing and historic buildings projects. He has extensive experience of corporate health and safety audits. He has in particular:

- worked as external safety adviser to SAS UK and Ireland between 1999 to 2006;
- managed a team acting as safety advisors and planning supervisors to Ernst & Young UK between 1999 to 2001 working with them to develop and implement a health and safety management systems to OHSAS 18001;
- worked with a number of organisations including Ealing Hospital, Luton and Dunstable Hospital, SEMA Group UK; Camelot; Birmingham International Airport; Croydon Council; SAS Scandinavian Airlines and Lufthansa German Airlines; and University's of Sussex, Brighton, Reading and Cranfield University, undertaking health, safety and fire audits, reviews and developing safety management systems.

PROFESSIONAL MEMBERSHIPS

- (2010) Graduate Member Institute of Occupational Safety and Health
- (2007) Registered Fellow of the Association of Project Safety
- (1995) Member of the Chartered Institute of Building

PROFESSIONAL EDUCATION AND TRAINING

- (2012) Working with ADB and BS 9999in Fire Safety Design of Buildings (3 days)
- (2009) Advanced Fire Safety Management (Fire Protection Association) (5 days) Passed
- (2008) Fire Risk Assessment and Fire Safety Management (Fire Protection Association) (5 days) Passed
- (2005) CDM 2007 for Designers Train the Trainer (CIRIA) (3 days)
- (2003) Postgraduate Diploma in Safety Management (Bournemouth University) Passed
- (2000) IATA Airline Safety Auditing (5 days) Not examined
- (1999) CAP642 Airside Safety Management (5 days) Not examined
- (1999) DNV OHSAS18001 Understanding and Implementing Not examined
- (1998) SPAB Professional Course in the Repair of Old Buildings Not examined
- (1998) BSI Implementing & Auditing BS8800 Safety Management Systems
- (1996) NEBOSH Diploma Risk Management Module Taught course only
- (1995) NEBOSH Diploma Law Module Passed
- (1995) CITB Planning Supervisors Introductory Course Not examined
- (1995) NEBOSH Construction Health and Safety Certificate Passed

Directors Mark Snelling MCIOB John Snelling FCIOB



PERSONAL PROFILE

MARK SNELLING MCIOB, RFAPS, GradIOSH

PROFESSIONAL EDUCATION AND TRAINING (continued)

- (1992) CIOB Project Evaluation and Development Distinction
- (1990) CIOB Member Exam Part II Passed
- (1989) CIOB Member Exam Part I Passed
- (1988) CIOB Certificate of Competence in Surveying Passed
- (1988) CIOB Certificate of Competence in Computing Passed
- (1988) Higher National Certificate in Building Studies Passed
- (1986) National Certificate in Building Studies Passed

CONTINUING PROFESSIONAL DEVELOPMENT

Date	Event	Organisers	Duration
22/09/2011	Fellowship Assessor Training	Association of Project Safety	1 day
08/09/2011	Association of Project Safety Annual Conference	Association of Project Safety	1 day
11/05/2011	Construction Fire Safety Risk Assessment	Association of Project Safety	1 day
11/11/2010	Construction Health Seminar	Construction H&S Group	1 day
19/10/2010	CDM2007 – Open forum review	HSE	½ day
22/04/2008	Managing CDM Compliance	Ai Solutions Ltd	½ day
12/02/2008	Regulatory Reform (Fire Safety) Order	CIOB	2 hours
20/05/2007	CDM 2007 Conference	London Borough of Bromley	½ day
15/05/2007	CDM 2007 - Designers awareness day	RICS / APS	1 day
08/02/2007	CDM and you – Practice issues for CDM-C's	Association of Project Safety	1 day
05/10/2006	Legislation update CDM 2007 & Corporate killing	Institute of Planning Supervisors	½ day
19/05/2006	Reducing Occupational Health Risks in Construction	Institute of Civil Engineers	1 day



PERSONAL PROFILE ALAN PRODGER CMIOSH

BACKGROUND

April 2012 to date	Director
2010 to 2012	Construction H&S Consultant / CDM Co-ordinator
2003 to 2010	SHEQ Manager
2001 to 2003	Aircraft dispatcher
1999 to 2001	Supervisor
1998 to 1999	Passenger services agent

Safetymark Consultancy Services South Downs Safety TH Kenyon & Sons Plc Serviceair Ltd Serviceair Ltd Serviceair Ltd

EXPERIENCE

Since May 2010 has worked as a construction health and safety consultant and CDM co-ordinator. Previously has worked as safety, health, environmental and quality manager for TH Kenyon & Son Plc a construction company based in the south of England. Was responsible for strategic, compliance and implementation advice to management, implementation and auditing of the Company's ISO 14001 & ISO 9001 accreditations, document development and review and construction site inspection.

PROFESSIONAL MEMBERSHIPS

2009 Chartered Member of the Institute of Occupational Safety and Health

PROFESSIONAL EDUCATION AND TRAINING

- 2012 Asbestos awareness training
- 2012 Radio detection techniques using RD8000 Locator
- 2011 2011 CITB Site Management Safety Training Scheme 2 Day Refresher
- 2011 Academy of CDM Co-ordinators CDM Certificate Open Exam
- 2010 CISRS Scaffold Safety Inspectors Course
- 2010 Behavioural Safety Training Course
- 2010 CITB (CSCS) Health & Safety Managers Card
- 2010 CITB Site Management Safety Training Scheme
- 2009 Basic Scaffold Inspection Course
- 2008 CITB Train the Trainer Course
- 2008 St John Ambulance First Aid at Work
- 2007 Asbestos Awareness Training
- 2007 Environmental Management Systems Auditing Course
- 2007 CS2 Ltd, Access Auditing Course
- 2006 East Sussex Fire & Rescue Service Fire Safety at Work Course
- 2005 City & Guilds National Vocational Qualification Level 4 in Occupational Health& Safety Practice
- 2004 NEBOSH General Certificate.



PERSONAL PROFILE

JEREMY HENDERSON-NEWTON CMIOSH MinstLM RMaPS

BACKGROUND

2004 to date	Health and Safety Consultant	
2001 to 2003	Health and Safety Manager	Gear Construction Management Ltd
1999 to 2001	Health and Safety Adviser	Ernst and Young
1997 to 1999	Group Safety Executive	Linford Group Ltd
1994 to 1997	Health and Safety Adviser	Lincsafe (Health and Safety) Ltd
1992 to 1993	Safety and Training Officer	Hertel (UK) Ltd

EXPERIENCE

A health and safety professional since 1989, Jerry is NEBOSH Diploma qualified, holds corporate membership of the Chartered Institution of Occupational Safety and Health & is a Chartered Safety & Health Practitioner (CMIOSH). He is a former NEBOSH examiner and is a qualified Internal Auditor.

Jerry has a wealth of experience in administrative, construction, including acting as Planning Supervisor and more lately as CDM Coordinator under the Construction (Design & Management) Regulations, as well as the education and light engineering fields.

His Planning Supervisor/CDM Coordinator experience covers a variety of projects from internal refurbishments, through effluent treatment plants to several hotels with project values in the range £100k – £82m

He has worked with such blue chip companies as Ernst & Young, ABN Amro Bank, Bausch & Lomb, Kerry Foods, Park Plaza Hotels, H & M Hennes, Oxford Aviation Academy (global flight training company) and Chartis Insurance (formerly AIG).

He has also assisted many other smaller companies to achieve improvements in their health and safety management, and has successfully managed major business re-engineering projects. A measure of his success in this field can be seen by being instrumental in achieving RoSPA Gold and Silver Awards for client companies.

Jerry is a self-disciplined, responsible and intelligent individual having good IT skills and communication and instructional abilities. A problem solver interested in developing health and safety/training cultures from a senior management/directorial perspective.

PROFESSIONAL MEMBERSHIPS

Chartered Member of Institute of Occupational Safety and Health Member of Institute of Leadership and Management (Registered Member of Association for Project Safety

PROFESSIONAL EDUCATION AND TRAINING

BSI Quality Assurance Internal Auditor NEBOSH Diploma in Occupational Safety & Health Certificate in Supervisory Management NEBOSH National General Certificate in Occupational Safety & Health Open University – Sociology

April 2012



PERSONAL PROFILE

ALASTAIR BURLEIGH Grad IFE

BACKGROUND

2009 to date	Fire Safety Consultant	
2006 to 2009	Sub Officer	Royal Berkshire Fire and Rescue Service
1999 to 2006	Fire Fighter	Royal Berkshire Fire and Rescue Service
1997 to 1999	Operations Manager	South Hill Park Arts Trust
1995 to 1997	General Manager	Anvil Trust Conference and Theatre Centre
1993 to 1995	Deputy Manager	Woking District Council Leisure Services

EXPERIENCE

Since 2006 has worked as a fire safety consultant acting for healthcare, public authority, industrial and commercial clients. He has acted as a fire risk assessor and risk manager, fire safety trainer in the adult learning sector, fire strategist and emergency contingency/resilience planner.

Since August 2008 he has acted as the fire safety adviser and authorising engineer to the Ealing Hospital NHS Trust. He has worked extensively with West London Mental Health NHS Trust on both their Broadmoor and St Bernard's Hospital sites as both fire safety adviser and authorising engineer.

He has particular experience as an authorising engineer and design and construction phase fire safety adviser for capital development works in healthcare and education.

He has previously worked as a sub officer for the Royal Berkshire Fire and Rescue Service with duties including operational management, emergency fire incident commander and hazchem officer. He was responsible within his unit for training, supervision, deployment and professional development of operational fire crews.

PROFESSIONAL MEMBERSHIPS

- 2009 Graduate Member, The Institution of Fire Engineers,
- 2009 Member of the Institution of Fire Safety Managers

PROFESSIONAL EDUCATION AND TRAINING

- 2009 Graduate level passes in Fire Safety, Fire Engineering Science, Fire Service Operations, Leadership and Management, *The Institution of Fire Engineers*
- 2009 A1 Assessor for NVQ candidates, EdExcel,
- 2009 Fire Services Management, National Occupational Standards, EdExcel,
- 2008 Teaching in the Lifelong Learning Sector, Thames Valley University,
- 2007 Firefighting Operations in the Community, National Occupational Standards, EdExcel,
- 1993 Royal Institute of Chartered Surveyors affiliated Land Management Course, *Reading University, Faculty of Urban and Regional Studies*
- 1990 Advanced level in Government and Politics, English Literature, European History, Forest 6th Form College
- 1988 9 GCSE (A to C) including Maths and English, *Forest Comprehensive School*
- June 2011



Safetymark

Consultancy

Services

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E-mail: enquiries@safetymark.net

ARK RVICES Appendix 4 - CDM-C Methodology May 2012

CDM Co-ordination

Our Approach

Safetymark Consultancy Services acted as Planning Supervisors from the introduction of the Construction (Design and Management) Regulations [CDM] 1994 in March 1995 until its replacement by the CDM 2007 in 2007, since when we have been enthusiastically acting as CDM Co-ordinators. Over this time we have earned a reputation for effective but pragmatic compliance with our statutory duties, addressing risk in a realistic way rather than following fixed ideas or rules.

We take our statutory duties seriously and believe that other members of the team should do likewise. We think of ourselves as an integral part of the design team. We believe that our role is one of facilitator, to ensure that risks that can be affected by design are identified, effectively assessed and where practicable controlled. We believe that recording and communication of information is a key part of our role and ensure that the Pre Construction Information, the Design Risk Register and the Health and Safety File are conspicuous for their clarity. We do not believe that safety considerations should stifle good design, on the contrary we believe that they should benefit the built environment.

Our Methodology

As CDM Coordinators our primary roles are to:

- give advice and assistance to the client on their compliance with the CDM Regulations;
- ensure that there are suitable arrangements for the co-ordination of health and safety measures during planning and preparation for the construction phase;
- take steps to identify, collect and communicate the pre-construction information;
- ensure that designers comply with their duties under the regulations;
- prepare or update the health and safety file.

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Our methodology is centred around three documents, or to be more accurate three collections of information, the Pre Construction Information, the Design Risk Register and the Health & Safety File

Pre Construction Information

The pre construction information is a document, or to be more accurate a collection of documents, to provide designers and contractors who may be bidding for the work (or whom clients intend to engage), with project-specific information needed to assist them to manage health and safety hazards and risk.

The pre construction information can also be used when reviewing designers and contractors fee proposals, costs estimated or tenders to determine whether they have made adequate provision to both comply with their statutory duties under safety related legislation and manage the hazards and risks associated with the project.

The pre construction information includes:

- a description of project and the planned programme for both design and construction
- the clients arrangements, developed with us as the CDM Co-ordinator, for managing health and safety during both the design and construction phases of the project
- where work is carried out on the clients premises, health and safety requirements relating to the of the client's undertaking
- restrictions related to the environment in which the site is located and on-site risks including those identified as part of the design process.
- health hazards, including those associated with existing structures, ground conditions and those arising from client's activities.

The pre construction information develops as a document until such time as the Principal Contractor produces a suitable construction phase plan. At this time the construction phase plan replaces the pre construction information as the health and safety management plan for the project. At this point responsibility for the plan also transfers from us as the CDM Co-ordinator to the Principal Contractor, although we retain responsibility for co-coordinating health and safety issues associated with ongoing design.



Appendix 4 - CDM-C Methodology

Safetymark Consultancy

May 2012

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The Design Risk Register

Although the CDM2007 ACOP makes the point that it is not a legal requirement under CDM 2007 for designers to record their deliberations when managing risk by design, it does emphasise the benefits of recording and providing information on the significant risks. It is suggested by the ACOP and confirmed by industry guidance that recording the design risk management process will satisfy the requirement under the Management of Health and Safety at Work Regulations 1999 for designers with more than five employees, to keep a written record of the significant risks identified in risk assessments.

CDM-C

We for our part believe that on all but the most simple projects it is impossible, due to the iterative nature of design, to manage risk during the design phase without having some record of the hazards identified and the action taken to avoid or reduce the associated risks. The need for recording is particularly important when either, there are many designers, or the design must pass from one set of designers to another.

We therefore recommend on all of our projects that the risk process is recorded using a central design risk register. It is our belief that a design risk register can be a very helpful, simple tool for recording issues, actions and ownership, in a manner that can be readily transmitted around the team.

When adopted on a project, the design risk register is used to record both the risks than can be controlled by design and the actions taken by designers to control these risks. To achieve this we facilitate a design risk review meeting at as early a stage in the design as our appointment allows and again at relevant points during the whole design process. It is important that the initial design risk review is attended by all designers and where practicable those who will construct, use, maintain and clean the building or structure. This allows the design team to create a register that identifies the key health and safety risks that designers must try to remove, reduce or control by design.

It was our belief that the register should be managed by us as CDM Co-ordinator however experience has shown over the last few years that although on smaller projects this results in a more accurate record of the design risk management process, there is a tendency on larger projects for designers to feel the process is ours rather than theirs. On such projects it is also difficult for the CDM Co-ordinator to be involved in the design process in such a way to ensure relevant hazards are always considered at appropriate time. We now recommend that the register is owned by the Lead Designer who is best placed to ensure that the listed Hazards are considered at the appropriate points. Our role as CDM Co-ordinator, as it is legally required to be, to ensure that the process happens. To do this we will monitor the design and the risk control process by attending design team meetings and where appropriate, by reviewing drawings and specification or the facilitation of further design risk review meetings.

Even though we believe the risk register should be at the centre of the risk management process and a useful tool to assist in the risk management process, it is perhaps not always the best means of communicating information to others within the team. Where therefore recommend, where appropriate, that information is extracted from the register and included as notes on drawings, or where more detailed information is required within the pre-construction information.

The Health and Safety File

The development of the health and safety starts as soon as we are appointed. At our first meeting with the client to agree the management arrangements we discuss and agree a suitable, user-friendly format for the file and what type of information it should contain. This format is then recorded in the pre construction information along with details of those who we feel will be responsible for producing the information. The file itself will not however contain much information until well into the design stage when information containing details of services and hazards that will remain after the construction work is completed and can be copied from the pre construction information into the file. The bulk of the information will be obtained via the Principal Contractor as the construction phase proceeds with as built drawings provided by the architect, structural engineer and specialist contractors and designers towards the end of the construction phase. The aim is to have the file ready to hand over to the client as practical completion.



Appendix 4 - CDM-C Methodology

Safetymark Consultancy Services

May 2012

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Managing the Flow of Information

A key CDM Co-ordinator duty is to "promptly provide in a convenient form to those involved with the design of the structure; and to every contractor (including the principal contractor) who may be or has been appointed by the client, such parts of the preconstruction information which are relevant to each"

CDM-C

Where ever practical we prefer to work using an online document management system. This approach allows all team members to have immediate access to all design information. The document management system at the start of the project will hold the pre construction information. As the project proceeds the design information will be added. Finally as the construction work proceeds the documents will be updated so that at the end of the project the information contained will become the project health and safety file.



Appendix 5 - Work Experience

CDM-C

Safetymark Consultancy Services

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Our Experience

May 2012

Safetymark Consultancy Services specialise in Offices, Factories, Healthcare, Education and Historic Buildings although we have experience in many other areas. Our client and project lists demonstrate our depth and breadth of experience.

Projects (CDM Co-ordinator)

Client	Project	Value	
Kier Harrow Projects	Construction of New School	£48,000,00	
West Hertfordshire Hospitals NHS Trust	Hospital Reconfiguration	£36,000,00	
Young Herts	New /Refurbished Children's Homes	£17,300,00	
East Kent Hospitals	Key Worker Accommodation	£6,800,00	
Ashford & St Peter's Hospital	St Peter's Hospital Reconfiguration	£7,200,000	
East & North Hertfordshire Hospitals	Radiotherapy Unit	£8,500,00	
East & North Hertfordshire Hospitals	Recladding Lister Hospital	£8,500,00	
Ealing Hospital	Fire Upgrade Project	£8,000,00	
Hertfordshire Partnership NHS Trust	Psychiatric Intensive Care Unit	£10,000,00	
North Middlesex University Hospital	Term contract for CDM Coordination	Variou	
Royal Surrey County Hospital Guildford	Endoscopy Unit	£2,500,00	
Camden PCT	Low Secure Unit, Highgate	£2,500,00	
West London Mental Health NHS Trust	Psychiatric Intensive Care Unit, St Bernard's	£4,200,00	
Assura Property Limited	New Health Centre, Ipswich	£5,000,00	
Surrey and Borders NHS Trust	Various projects un to £1,000,000	Variou	
Luton & Dunstable Hospital NHS Foundation Trust	Neonatal Intensive Care Unit	£4,500,00	
Assura Property Limited	New Health Centre, Tunbridge Wells	£3,800,00	
Assura Property Limited	New Health Centre, Shinfield	£2,000,00	
Marston Properties	New Flats, Putney	£12,000,00	
Geoffrey Osborne Limited	Industrial Units Witham	£5,000,00	
Property Investment Holdings Ltd	The Old House Weybridge	£200,00	
Property Investment Holdings Ltd	Conversion to Residential, Slough	£900,00	
Property Investment Holdings Ltd	Commercial Upgrade, Redhill	£500,00	
Property Investment Holdings Ltd	Factory Upgrade, Newbury	£500,00	
University of Reading	Fire Upgrade, Food Bioscience	£500,00	
Croydon Council	School Extension and Upgrade	£1,300,00	
Merchant Taylors' School	Sport Facilities Project	£5,000,00	
Charterhouse School	Boarding House Upgrade	£1,000,00	
Lewisham Homes	Lift Upgrade Project	£790,00	
The Wimbledon (Lakeside) Club	Extension to Clubhouse	£900,00	
Tussauds Group	Lightweight Events Venue	£900,00	
Universal Beverages Limited	New Canning Line	£2,500,00	



Appendix 5 - Work Experience

May 2012

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Our Experience

Safetymark Consultancy Services specialise in Offices, Factories, Healthcare, Education and Historic Buildings although we have experience in many other areas. Our client and project lists demonstrate our depth and breadth of experience.

Projects (CDM Co-ordinator)

Current Projects					
Client	Project	Value			
Peel Ports Chatham	Dock Gate Refurbishment	£8,500,000			
Hertfordshire Partnership NHS Trust	80 Bed Mental Health Unit with	£40,000,000			
	Business and Training Centre				
Royal Surrey County Hospital NHS Trust	Endoscopy Department	£1,850,00			
East & North Herts Hospitals NHS Trust	Women's Services Redevelopment	£4,000,00			
Ealing Hospital NHS Trust	Maternity Redevelopment	£4,000,00			
Completed Projects					
Kier Harrow Projects	Construction of New School	£48,000,00			
West Hertfordshire Hospitals NHS Trust	Hospital Reconfiguration	£48,000,00			
Young Herts	New / Refurbished Children's Homes	£17,300,00			
Hertfordshire Partnership NHS Trust	New Build Mental Health Units	£16,000,00			
Universal Beverages Limited / Heineken	New Canning Facility	£4,500,00			
East Kent Hospitals	Key Worker Accommodation	£6,800,00			
Ashford & St Peter's Hospital	St Peter's Hospital Reconfiguration	£7,200,000			
East & North Hertfordshire Hospitals	Radiotherapy Unit	£8,500,00			
East & North Hertfordshire Hospitals	Recladding Lister Hospital	£8,500,00			
Ealing Hospital	Fire Upgrade Project	£8,000,00			
West Hertfordshire Hospitals NHS Trust	Fire Upgrade Programme	£3,500,00			
Assura Property Limited	New Health Centre, Ipswich	£5,000,00			
Assura Property Limited	New Health Centre, Tunbridge Wells	£3,800,00			
Assura Property Limited	New Health Centre, Shinfield	£2,000,00			
Marston Properties	New Flats, Putney	£12,000,00			
Geoffrey Osborne Limited	Industrial Units Witham	£5,000,00			
Property Investment Holdings Ltd	The Old House Weybridge	£200,00			
University of Reading	Fire Upgrade, Food Bioscience	£500,00			
Croydon Council	School Extension and Upgrade	£1,300,00			
Merchant Taylors' School	Sport Facilities Project	£5,000,00			



Appendix 5 - Work Experience

May 2012

Safetymark Consultancy Services

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Our Experience

Safetymark Consultancy Services specialise in Offices, Factories, Healthcare, Education and Historic Buildings although we have experience in many other areas. Our client and project lists demonstrate our depth and breadth of experience.

Projects (CDM Co-ordinator)

Client	Project	Value
North Middlesex University Hospital	New Women's and Children's Unit	£45,000,00
Merchant Taylors School	New Design & Technology Centre	£4,500,00
Combined Heat and Power installation	Lister Hospital	£18,700,00
East & North Herts Hospitals NHS Trust	Women's Services Redevelopment	£4,000,00
Ealing Hospital NHS Trust	Maternity Redevelopment	£4,000,00
Hertfordshire Partnership NHS Trust	80 Bed Mental Health Unit	£10,000,00
Luton and Dunstable Hospital	New Catheterisation Laboratory	£3,000,00
Repair of Chatham Docks Lock Gates	Peel Ports	£8,500,00
Royal Surrey County Hospital NHS Trust	New Endoscopy Department	£3,900,00
Guy's & St Thomas' Hospital NHS Trust	Renal Unit Fit Out	£1,100,00
Completed Projects		
Removal of fortified wine packaging line	Universal Beverages Ltd	£250,00
Installation of premium wine line	Gaymer Cider Company	£500,00
New building and packaging line	Universal Beverages Ltd	£1,500,00
Liquid brewing production facility	Universal Beverages Ltd	£1,000,00
Kier Harrow Projects	Construction of New School	£48,000,000
East & North Hertfordshire Hospitals	Radiotherapy Unit	£8,500,00
East & North Hertfordshire Hospitals	Recladding Lister Hospital	£8,500,00
West Hertfordshire Hospitals NHS Trust	Hospital Reconfiguration	£36,000,00
West Hertfordshire Hospitals NHS Trust	Fire Upgrade Programme	£3,500,00
Assura Property Limited	New Health Centre, Ipswich	£5,000,00
Assura Property Limited	New Health Centre, Tunbridge Wells	£3,800,00
Assura Property Limited	New Health Centre, Shinfield	£2,000,00
Marston Properties	New Flats, Putney	£12,000,00
Geoffrey Osborne Limited	Industrial Units Witham	£5,000,00
Young Herts	New / Refurbished Children's Homes	£17,300,00
Hertfordshire Partnership NHS Trust	New Build Psychiatric Intensive Care	£10,000,00
Hertfordshire Partnership NHS Trust	Children's Mental Health Unit	£4,000,00
PDS Vial Filling Facility Patheon	Patheon UK	£800,00
New Cephalosporin QC laboratory	Patheon UK	£400,00
Process Floor Refurbishment	Bio Products Laboratory	£200,00