

APPROVED SUB-CONTRACTORS HEALTH AND SAFETY COMPETENCY ASSESSMENT			
Section 1: Subcontractor Details			
Sub-Contractor Name:			
Address:			
Telephone Number:			
Name of Main Company Contact:			
Nature of Business:			
Number of Employees:			
Companies House Registration Number:			
VAT Registration Number:			
National Insurance Number:			
UTR Number:			
Section 2: Bank Details			
Name of Bank			
Account Name			
Sort Code		Account Number	
Accounts E-Mail Address			
Accounts Contact Name			
Section 3: Insurance Details			
Employers Liability Insurance:			
Insurer Name:		Limit of Liability:	£
<i>*Please attach a copy of your employer's liability insurance.</i>			
Public/Product Liability Insurance:			
Insurer Name:		Limit of Liability:	£
<i>*Please attach a copy of your public/product liability insurance.</i>			
Professional Indemnity Insurance:			
Insurer Name:		Limit of Liability:	£
<i>*Please attach a copy of your professional indemnity insurance.</i>			
Section 4: Health & Safety Management			
Do you have a process for investigating and reporting injuries, diseases and dangerous occurrences?	YES /NO		
Number of RIDDOR reportable accidents in the past 3 years			
Have you received enforcement action, warning letters, notices or been prosecuted in the past 5 years? If yes, please attach details.	YES/NO		
Are you Accredited to CHAS, Safe Contractor or Constructionline?	YES/NO		
<i>*If yes, please attach a copy of your certificate.</i>			
Are you certified to OHSAS 18001?	YES/NO		

**If yes, please attach a copy of your certificate and move onto section 5. If no, please complete the following questions:*

1. Do you have a written health and safety policy?	YES/NO
<i>*If yes, please provide a signed and dated copy.</i>	
2. Do you have a system in place to identify all Health & Safety legislation relevant to your operations/business?	YES/NO
<i>*Please provide evidence of this</i>	
3. Do you comply with all current Health & Safety legislation?	YES/NO
4. Please provide the name and qualifications of your internal or external Health and Safety Advisor	
<i>*Please provide qualifications</i>	
5. Please provide evidence of Health and Safety Competency Training for all Staff e.g. Training matrix CSCS/ECS/PASMA/IPAF/SMSTS/SSSTS/Asbestos Awareness etc	<i>*Please provide copies.</i>
6. How do you ensure your employees comply with Health & Safety rules and regulations?	
7. Are you likely to use sub-contractors on any contracts with RCE?	YES/NO
<i>* If yes, please provide details of how you assess the competence of your subcontractors prior to appointment</i>	
8. Do you have a process for assessing risks to the Health & Safety of employees and others?	YES/NO
9. Do you provide Risk Assessments, COSHH Assessments and Method Statements for the work you carry out?	YES/NO
<i>*Please Provide examples</i>	
10. Do you have arrangements in place to assess and protect your employees from injuries due to manual handling?	YES/NO
<i>*Please provide examples of manual handling certificates/training</i>	
11. Do you provide all necessary PPE to your employees?	YES/NO
<i>*If 'Yes' please provide details of the PPE Provided below. If 'No' please justify the reasons for not adhering to the requirements of the Personal Protective Equipment at Work Regulations 1992 as amended.</i>	
12. Do you ensure all equipment used on site is well maintained and safe for use?	YES/NO
<i>*Please provide evidence of Plant/Machinery/tool checks</i>	

13. If so how.	
Section 5: Environmental Management	
Do you have a process for investigating and reporting environmental incidents? * If yes please explain.	YES/NO
Number of major environmental incidents in the past 3 years	
Have you received enforcement action, warning letters, notices or been prosecuted in the past 5 years? *If yes, please attach details.	YES/NO
Are you certified to ISO 14001?	YES/NO
<i>*If yes, please attach a copy of your certificate and move onto section 6. If no, please complete the following questions:</i>	
1. Do you have a written environmental policy that is relevant to the size, nature and function of your business? * If yes, please provide a signed and dated copy.	YES/NO
2. Do you have a system in place to identify all Environmental legislation relevant to your business?	YES/NO
3. Do you comply with all current Environmental legislation?	YES/NO
4. Do you carry out environmental training? *Please attach evidence	YES/NO
5. How do you monitor environmental performance on site?	
Section 6: Quality Management	
Are you certified to ISO 9001?	YES/NO
<i>*If yes, please attach a copy of your certificate and move onto section 7. If no, please complete the following questions:</i>	
1. Do you have a written quality policy that is relevant to the size, nature and function of your business? *If yes, please provide a signed and dated copy.	YES/NO
2. Do you have a process for assessing and correcting faults?	YES/NO
3. Do you conduct regular audits of quality performance of employees?	YES/NO
Section 7: Data Protection	
1. Do you have a written privacy policy? If yes, please provide a signed and dated copy.	YES/NO
2. Please provide details on how your policy is communicated to customers, suppliers, sub-sub-contractors.	
3. Do you have arrangements in place to ensure you handle employees' confidential information in accordance with GDPR legislation?	YES/NO

4. Do you have arrangements in place to ensure you handle any personal data we may send you during the performance of a contract in a confidential manner in line with GDPR legislation?	YES/NO
5. Have you provided GDPR training to all employees? *If yes please provide evidence	YES/NO
6. Do you have a procedure in place to carry out the legal checks for “right to work” for all of your employees?	YES/NO

**If no, please explain why:*

Section 8: References

Please provide two references in relation to works you have previously undertaken within the field of works you are providing to RCE Ltd

Reference 1	
Reference 2	

Section 9: Completion

I certify that the details given in this assessment are correct and accurate.

Name:		Signed:	
Position:		Date:	

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	YES	NO
Has all the information requested above been received?		
Is the documentation satisfactory?		
Is the contractor Approved?		
Is Senior Management Authorisation Required before acceptance?		
Name of Authorising Manager/Director		
Name		
Date		
Signature		
Record and Document Scan onto System		
Date of re-assessment recorded		