



Conference

Local Church Contractor Management Major Contract Work



2018

Contractor Health and Safety Pre-Qualification Agreement

A. Summary

This is a Health and Safety agreement between the Conference or one of its Seventh-day Adventist Churches, and the Contractor. Please complete this form by answering (by ticking) either Yes or No to each of the questions in this document

Contractor Business Name:		
Contractor Representative's Name and Contact details:	Name:	
	Mobile:	
	Email:	
Conference or Church representative's Name and Contact Details:	Name:	
	Mobile:	
	Email:	

B. Contractor Documentation

On behalf of the Contractor, on signing this form, I confirm that:

- I am authorized to provide this information and sign this form
- The information provided in this form is true and correct
- I understand that if the information I have provided is not true or correct, Conference or one of its Churches may withdraw the Contractor's health and safety approval, and take any other action available to them
- I understand the Contractor will be liable for anything Conference or its Churches have done or omitted because they had reasonably relied on the accuracy of information provided in this questionnaire

As Contractor to Conference or one of its Churches:

- We agree to abide by the requirements of current New Zealand Health and Safety Legislation, Regulations, Codes of Practice or relevant Standards pursuant to that legislation whilst working for or on behalf of Conference or one of its Churches
- We agree to abide by the requirements specifically outlined in the Contractor Safety Standards
- We understand that the contract may be terminated if there is non-compliance with this document and/or any provisions of Health and Safety Legislation

Contractor/Consultants Representative's Name:	Position:
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Contractor/Consultants Representative's Signature:	Date:
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C. Accepted Certification

Do you have a current certification to a health and Safety Audit Standard, such as ACC, WSMP, Tertiary, AS/NZS 4801, ISO18001 or similar?

If yes Complete Sections B & L

☐ Yes ☐ No

D. Self Employed Contractors

If the Contractor is self-employed, carries out low-risk maintenance work such as minor repairs or improvements, and does not have their own Safety Management System, does the Contractor agree to abide by the Conference or by any of its Churches' Safety requirements

☐ No

☐ Yes

If the Contractor Falls into the category above and has ticked Yes, only complete Sections B & L

If the Contractor has ticked No above, or the category does not apply, they must complete and return all of this document and provide the required information in order to have their Health and Safety Pre-Qualification by Conference or one of its Churches

E. Performance

Has your organization had any workplace serious harm injuries in the last 3 years? If Yes please provide a summary of key details including causes and any remedial action taken	<input type="checkbox"/> Yes <input type="checkbox"/> No
Has your Organisation had any fatalities in the last 3 years? If Yes please provide a summary of key details including causes and any remedial action taken	<input type="checkbox"/> Yes <input type="checkbox"/> No
Has your organization been prosecuted by WorkSafeNZ for breach of H&S Legislation or regulations in the last 5 years? If Yes please provide a summary of key details including causes and any remedial action taken	<input type="checkbox"/> Yes <input type="checkbox"/> No
Has your organization been issued with any Improvement, Prohibition or Infringement notices by WorkSafeNZ in the last 5 years? If Yes please provide a summary of key details including causes and any remedial action taken	<input type="checkbox"/> Yes <input type="checkbox"/> No
Do you review H&S at Management and Board level?	

Please provide a copy of Senior Management and Board Meeting Minutes relating to Health and safety	<input type="checkbox"/> Yes <input type="checkbox"/> No
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F. Hazard Management

Does your Organisation, Sub-contractors, and agents agree to identify any hazards, level of risk and controls for those hazards that they are bringing onto Conference or Church managed premises? Please Provide a copy of your Hazard/Risk Management Procedure and current Hazard/Risk Register	<input type="checkbox"/> Yes <input type="checkbox"/> No
Does your Organisation agree to conduct Safety Inspections to ensure your Employees comply with relevant Safety Procedures on our premises? Please provide a copy of your process used to carry out Site Safety Assessments and 2 completed copies of recent assessments	<input type="checkbox"/> Yes <input type="checkbox"/> No
Does your Organization agree to regularly review hazards and advise Conference or Church immediately if any hazards change or new ones are reported? Please give a brief overview of how this will be carried out	<input type="checkbox"/> Yes <input type="checkbox"/> No

G. Emergency Procedures

Will your Employees be involved in developing any Emergency Plans required for the work activities at Conference or Church managed premises? (e.g. High Risk Work?) Please provide information on: <ul style="list-style-type: none"> General Emergency Procedures for Employees when carrying out work on behalf of Conference or one of its Churches Specific Emergency Procedures for High Risk work such as heights and confined spaces (if applicable) 	<input type="checkbox"/> Yes <input type="checkbox"/> No
	<input type="checkbox"/> Yes <input type="checkbox"/> No

Will the Emergency Plans identify all responsibilities and procedures to be followed?	
<p>Will all your employees and Sub-contractors receive training in your Emergency Procedures for work carried out at Conference or Church managed premises?</p> <p>Please provide evidence of training (e.g. Current First Aid certificates, Fire Extinguisher Training)</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No

H. Accident Investigation

<p>Does your Organisation have procedures for investigation, reporting and follow up of all accidents?</p> <p>Please provide a copy of"</p> <ul style="list-style-type: none"> • Your Incident Management procedure • Two completed copies of separate incident reports Current Incident Register (for the last 12 months) 	<input type="checkbox"/> Yes <input type="checkbox"/> No
<p>Are the results of any investigation communicated to Employees?</p> <p>Please provide a copy of evidence in the form of 'Tool Box Meeting Minutes, email to employees etc.</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No
<p>Does your Organisation agree to immediately report all injuries, environmental incidents, property damage or near misses to Conference or its Church?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No

I. Safety Training

<p>Is Health and Safety training carried out on a regular basis?</p> <p>Please provide a brief summary on planned Health and Safety training for the next 12 months</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No
<p>Will all of your Employees and Sub-Contractors undertaking work on our premises be competent for the work required?</p> <p>Will they be under adequate supervision by someone who is trained and/or experienced to ensure the work is done safely?</p> <p>Provide copies of evidence of Employee training and competence. This can be in the form of:</p> <ul style="list-style-type: none"> • Training Certificates • Copies of Certifications and Licenses • NZQA Record of Learning • Company Traing Records/Matrix. 	<input type="checkbox"/> Yes <input type="checkbox"/> No

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J. Sub-Contractors

<p>Does your organization have in place procedures for the selection and management of Sub-Contractors similar to Conference or Church Contractor selection process</p> <p>Please provide a copy of:</p> <p>Your procedure for the Selection, Induction, Monitoring and Evaluation of Sub-Contractors</p> <p>Your list of approved or intended Sub-Contractors for this contract</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No
<p>Will your organization induct your Sub-Contractors into Conference or Church safety requirements of the Contract in areas under their control?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No
<p>Will you ensure any Sub-Contractors or agents working on your behalf will abide by the requirements laid out in this document?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No

K. Site/Project Safety Methodology

<p>The Contractor has a Health and Safety Plan Specific to the work being carried out?</p> <p>Please provide a copy of the Health and Safety Plan specific for this contract. The Health and Safety Plan must be accepted by Conference or its Church prior to any work commencing</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No
<p>The Contractor has Safe Work Methodologies (e.g. Safe Work Method Statements, Job Safety Analysis and Task Analysis) in place for High Risk and routine maintenance work?</p> <p>Please provide a copy of any Safe Work Methodologies for work to be carried out on the contract</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No

L. General

<p>The Contractor agrees to make available for in section on demand by Conference or Church any documentation relating to health and safety in connection with this contract</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No
<p>Conference or Church has the right to monitor the Contractor's activities and carry out a Health and Safety Audit from time to time during the progress of the contract</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No
<p>Conference or Church has advised the Contractor of general Emergency procedures, emergency equipment location, location and use of safety equipment, basic safety rules, hazards and hazard controls, go and no-go areas and access and authorisation requirements relevant to the service being performed</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No
<p>Before beginning work on the contract, or if there is significant change to the type of work being undertaken, the Contractor will carry out a systematic identification of hazards likely to be encountered, assess the risk level and develop controls including Emergency procedures for those identified as High Risk hazards. This Information will be supplied to Conference or Church for approval prior to work commencing in the form of a Safety plan and safe Work Methodologies such as a Safe Work Method Statement, Job safety Analysis or Task Analysis</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No