

Leitrim County Council	Prepared by: SMC Working Group
GEN SMS F52	Approved by: SMC
Uncontrolled when printed	Revision No: 01

Leitrim Co. Council				
Safety and Health Questionnaire				
For Construction Contractors & Project Supervisors (CP 07-01b)				
CONTRACTOR:				
PROJECT:				
DATE:				
		Potential Mark	Actual Mark	Comments
1.	Safety Statement Validity A signed & dated copy of the Safety Statement Validity Form is enclosed.	25		
2.	Is each member of your organisation aware of his/her responsibilities under the Construction Regulations 2013? Yes ☐ No ☐	5		
3.	Please provide the names and details of any Health and Safety courses attended by key personnel within your organisation in the last 3 years. (<i>Provide evidence</i>)	15		

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4.	Please provide details of membership of any relevant professional safety organisation held by your organisation or key members within your organisation.	15		
5.	Please provide information on all prohibition, improvement or other enforcement notices issued against your company within the past 5 years.	20		
6.	Please provide information on any awards received for accident prevention within the last 5 years.	10		
7.	Please provide summaries of statistical information in relation to company accidents, injuries and dangerous occurrences over the last 3 years.	15		
8.	Please provide details of any prosecution(s) undertaken against your company or individuals employed by your company for breaches of health and safety legislation within the past 5 years.	15		

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ORGANISATION				
9.	Please outline your organisational procedures for disseminating information on up-to-date developments in health and safety issues.	10		
10.	If applicable, are there safety representatives appointed within your workforce? Yes ☐ No ☐	10		
11.	Do you have a safety committee for consultation purposes? Yes ☐ No ☐	10		
PLANNING AND MONITORING				
12.	Does your organisation currently undertake a post-contract review of health and safety management? Yes ☐ No ☐	10		
13.	Please outline your organisational structure for the coordination of health and safety information between: (a)Project Supervisor Construction Stage and Project Supervisor Design Process (b)Project Supervisor Construction Stage and Contractors/Sub-Contractors.	5 5		

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RESOURCE				
14.	Please outline any specialist resources which are utilised by your organisation in an advisory capacity on health and safety matters	10		
15.	Do you undertake competency assessments of all your Contractors/Sub-Contractors prior to appointment? Yes ☐ No ☐	10		
16.	How do you monitor the competence and effective resourcing of your Sub-Contractors in health and safety matters?	10		
	Contractor Total	/200		
PROJECT SUPERVISOR – EXPERIENCE (Only mark if being considered for Project Supervisor)				
17.	Please provide details of experience in similar type project to that proposed under this project.	10		
18.	Please provide copies of any relevant Health and Safety Plans prepared by your organisation for similar projects.	10		
19.	Please provide proof of having created Safety Files for similar construction projects.	10		

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ASSESSMENT			
Total marks available:	200/230		
Actual marks achieved:			
Pass rate Contractor - 140/200 Project Supervisor - 160/230			
Questionnaire PASS / FAIL			
Signed:			
Further Information Required on Questions Yes ☐ No ☐			Comments:
Signed:			