



Abu Dhabi EHSMS Regulatory Framework (AD EHSMS RF)

EHS Regulatory Instrument

Code of Practice

**EHS RI - CoP 53.1 – EHS Construction
Management Plan**

Version 2.0

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ACKNOWLEDGEMENTS

With gratitude Abu Dhabi EHS Center acknowledges the great support provided by the Executive Council in facilitating the issuance of Abu Dhabi Emirate Environment, Health and Safety Management System (AD EHSMS) and its implementation at Emirate level.

The issuance of the system would not have been possible without the supervision, diligent efforts and productive recommendations of the AD EHS Center Board of Directors.

These documents (Regulatory Instruments) constitute the efforts of the Abu Dhabi EHS Center and the concerned Sector Regulatory Authorities who worked together to integrate all relevant regulatory requirements under *AD EHSMS RF*. The input, contribution and constructive views of all sectors is highly appreciated.

May these documents prove to be beneficial and helpful in system implementation and in expanding the knowledge in the EHS field.



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Table of Contents

1.	Introduction	6
1.1	Objectives	6
1.2	Submission and Approval	7
1.3	EHS-CMP Content and Recommended Format	7
2.	Training and Competency.....	7
3.	Requirements	8
3.1	EHS-CMP Content.....	9

Appendix A: Example Risk Assessment Form

Appendix B: Example EHS Induction Form

Appendix C: Example Tool Box Talk Form

Appendix D: Example Site Inspection Checklist Forms

Preface

This Abu Dhabi EHS Regulatory Instrument was developed by the Building and Construction Sector Regulatory Authority as the primary Competent Authority for this topic to set the minimum mandatory requirements.

Every effort was made in developing this document so that it does not conflict with existing local or federal laws and regulations. In case of conflict, requirements of the existing local and federal laws and regulations shall prevail, and all concerned are obliged to bring the same to the attention of AD EHS Center for resolution.

This AD EHS Regulatory Instrument has been developed, reviewed and approved, following the process as described in *AD EHSMS Implementation Guideline: The Integration of EHS Requirements in the Emirate of Abu Dhabi*, by the following stakeholders:

- Abu Dhabi EHS Higher Committee;
- Abu Dhabi EHS Center;
- Environment Agency Abu Dhabi;
- Department of Municipal Affairs;
 - Abu Dhabi City Municipality;
 - Al Ain City Municipality;
 - Western Region Municipality;
- Department of Transport – Abu Dhabi;
- Abu Dhabi Water and Electricity Authority;
- Health Authority Abu Dhabi;
- Higher Corporation for Specialized Economic Zones (ZonesCorp);
- Center for Waste Management – Abu Dhabi;
- Abu Dhabi Tourism Authority;
- Abu Dhabi Food Control Authority;
- Abu Dhabi Education Council;
- Regulation and Supervision Bureau; and
- Other Relevant Federal and Local Competent Authorities.

The AD EHSMS consists of the following hierarchy of documents:

- AD EHSMS RF Elements - Mandatory System Requirements

EHS Regulatory Instruments:

- Standards and Guideline Values - Mandatory EHS threshold and exposure levels
- Codes of Practice - Mandatory EHS technical requirements – subject specific
- Mechanisms - Mandatory system implementation processes and procedures

Guidelines:

- Technical Guidelines - Non-mandatory guidance on how to implement an EHS Regulatory Instrument
- AD EHSMS Guidance Documents - Non-mandatory guidance and interpretation of an *AD EHSMS RF* concept and/or principle

Further, this document is not intended to conflict with any contractual obligations in effect at the time of its issuance. However, all future contracts shall adhere to applicable requirements stated herein, and existing long term contracts shall be brought into compliance with its requirements as soon as reasonably practicable as stipulated by relevant subject authorities.

This document will be reviewed periodically as part of the continual improvement cycle.

1. Introduction

- (a) This Code of Practice (CoP) applies to all employers within the Emirate of Abu Dhabi. This CoP is designed to incorporate requirements set by Abu Dhabi EHS Center and Sector Regulatory Authorities in the Emirate of Abu Dhabi.
- (b) This CoP establishes the minimum requirements and standards for the development and implementation of an EHS Construction Management Plan (EHS-CMP). The development and implementation of an EHS-CMP helps to ensure that construction projects consider all EHS hazards and aspects, in accordance with the requirements of all applicable legislation within the emirate of Abu Dhabi, in particular those outlined in the *AD EHSMS RF*.
- (c) The EHS-CMP is a site-specific plan developed to ensure that appropriate EHS management practices are developed, implemented and monitored during the construction phase of a project.
- (d) Principal Contractor (PC) when used in this CoP refers to the main contractor overseeing and responsible for activities undertaken on the site within the Building and Construction Sector. Refer to *AD EHS RI – Mechanism 9.0 – Notification of Principal Contractor for Construction Work*.

1.1 Objectives

- (a) Based on the risk or complexity of the project, the Building and Construction SRA shall decide what level of detail is required in the EHS-CMP for the project. The client will be informed of the submission requirements at the time of applying for the building permit.
- (b) The objectives of the EHS 'Construction Management' plan are as follows:
 - (i) implement practical effect the commitment to EHS and set the initial framework for the Environment, Health and Safety Management System;
 - (ii) ensure maximum flexibility in meeting requirements whilst complying with the relevant standards of the *AD EHSMS RF* and the Building & Construction Sector EHSMS Requirements;
 - (iii) ensure a systematic approach to management of Environment, Health and Safety;
 - (iv) manage risk associated with the construction activities;
 - (v) establish training programs for all staff and operatives appropriate to task, role and the project requirements;
 - (vi) provide a structure to ensure that environment, health and safety issues are effectively managed in a consistent and integrated manner;
 - (vii) ensure appropriate control and co-ordination of all parties to the construction phase of the project with regard to environment, health and safety;
 - (viii) generate a culture where everyone, irrespective of their position, understands that they have a part to play in ensuring that incidents and ill health are prevented and that impact on the environment is minimized; and
 - (ix) ensure a safe working environment for all those who work on the project.

1.2 Submission and Approval

- (a) The client will be informed, at the time of applying for a building permit with the relevant municipality, the level of EHS-CMP that is required for the project.
- (b) The level of the plan required will be based upon the risk and complexity of the project.
- (c) The client will be informed at the time of application, the submission requirements and relevant timescales for review and approval.

1.3 EHS-CMP Content and Recommended Format

- (a) The content of an EHS-CMP shall vary by project, as the size and scope of a construction project varies. Table 1 (Section 3.1) below indicates which elements are required for all projects (Sections 1-4) and which are only required if the relevant hazard / impact is present through the construction activities.
- (b) Sections 1-4 shall be included in all EHS-CMP's as they outline the project specific management systems and control measures that shall be required for every project. Section 5 identifies some of the more common hazards or impacts that may be present on projects. This list is not intended to be exhaustive and it is the responsibility of the PC who is developing or submitting the EHS-CMP to ensure that all hazards and impacts are identified and appropriate control measures are included and developed.

2. Training and Competency

- (a) Employers shall ensure that EHS training complies with the requirements of:
 - (i) *AD EHSMS RF – Element 05 – Training and Competency;*
 - (ii) *AD EHS RI – Mechanism 7.0 – AD EHS Professional Entity Registration;* and
 - (iii) *AD EHS RI – Mechanism 8.0 – AD EHS Practitioner Registration.*
- (b) Employers shall ensure employees and other persons required to implement the requirements of this CoP, or those who have a direct role in the management, supervision or monitoring of the requirements of this CoP are trained and competent to fully understand the requirements.
- (c) The requirements for specific training needs within the project are discussed within Table 1, Section 4.6.
- (d) Employers shall maintain a record of the required training that contains the following information:
 - (iv) name and ID number;
 - (v) Emirates ID number;
 - (vi) subject(s) of training;
 - (vii) training provider;
 - (viii) date(s) of training; and

- (ix) person(s) providing the training.

3. Requirements

- (a) Section 3.1 1 below outlines the minimum requirements that must be included in all EHS-CMP's that are developed and submitted to the SRA for approval.
- (b) The table provides information on the project specific requirements that shall be included within the plan.
- (c) Where an entity has an approved EHSMS under decree 42 of 2009, reference can be made to their approved EHSMS to avoid duplication within the EHS-CMP.
- (d) The table also provides information on the *AD EHSMS RF* compliance requirements. The Principal Contractor shall ensure that the plan meets all relevant requirements as described within the *AD EHSMS RF*.
- (e) It is the responsibility of the Principal Contractor to ensure that all legal requirements, including local and federal requirements are met when developing the EHS-CMP.
- (f) Guidance and forms are provided within the annexures of this document. These are for guidance purposes only and it is the responsibility of the Principal Contractor to ensure they meet the requirements. *AD EHSMS RF* forms are available for free download at www.adehsms.ae.

3.1 EHS-CMP Content

No.	Topic	EHS-CMP Project Specific Requirements	AD EHSMS RF Compliance Reference
Section One – Project Details			
1.1	Project Details	<p>This section shall include, at a minimum:</p> <ul style="list-style-type: none"> • name/title of the project or industry; • client's name, and contact information. • consultant's name, contact information, and AD EHS Center Registration Number; • name and contact information for other members of the design team; • approved PC name and contact information; • name and contact information for other sub-contractors; and • other relevant personnel and contact details. 	N/A
Section Two – Document Control			
2.1	Document Control	<ul style="list-style-type: none"> • The initial issue date of the EHS-CMP; • A record of ongoing issue; • A mechanism to record subsequent changes; • A mechanism to record the persons who have been briefed on the plan and confirmation of their understanding; and • Distribution list. 	AD EHSMS RF - Element 09

No.	Topic	EHS-CMP Project Specific Requirements	AD EHSMS RF Compliance Reference
Section Three – Project Description			
3.1	Project Description	Location	<ul style="list-style-type: none"> This section shall include a general description of the location and environment at the project site and surrounding area. It shall also provide maps that show the geographic location of the project area and surroundings. Maps shall include all necessary information, such as key, scale, north arrow, legend, location of sensitive receptors, and distance to sensitive receptors.
3.2		Scope	<ul style="list-style-type: none"> This section shall include a discussion of the objectives and scope of the construction project. For example, if activities will be conducted in separate phases, and the EHS-CMP is being submitted only for one particular phase of the development, then this section shall describe those activities to be addressed by this specific plan.
3.3		Project Schedules and Milestones	<ul style="list-style-type: none"> This Section shall include an anticipated schedule for the project, including a proposed completion date for construction and the main anticipated milestones. If the construction phase includes different phases or stages, a proposed schedule for each phase within the overall project must be provided. It shall also include the hours when construction activities will take place outside typical work hours and any restrictions that may be in place. It shall also include anticipated manpower requirements, linked to the phasing of the project.
Section Four – Project EHS Management			
<p>The EHS Management section of the EHS-CMP shall include information regarding the overall EHS management of the project, specific to the issues identified below. Each section shall include as a minimum a site specific policy/procedure on how the issues are going to be managed and controlled.</p>			

No.	Topic	EHS-CMP Project Specific Requirements	AD EHSMS RF Compliance Reference
4.1	EHS Policy and Management	<ul style="list-style-type: none"> • Shall include a commitment towards continual improvement. • Demonstrates how senior management will lead by example. • Contains commitment to comply with applicable legislation. • Signed by senior management. 	<i>AD EHSMS RF - Element 09</i>
4.2	Roles and Responsibilities	<ul style="list-style-type: none"> • This section shall include the roles and responsibilities of personnel identified within the project organogram. • Each role identified shall have defined responsibilities and accountabilities with regards to EHS. 	<i>AD EHSMS RF - Element 01</i>
4.3	EHS Legal Requirements	<p>General</p> <ul style="list-style-type: none"> • This section shall detail the legal requirements to be adhered to and shall include the following information: <ul style="list-style-type: none"> ○ a listing of the applicable EHS regulations with which the proponent will comply; this list shall include Federal, Emirate and International Standards and/or Agreements; and ○ a listing of any applicable EHS Standards, such as ambient noise levels, air quality or water quality. The EHS-CMP shall also clearly define the Standards. 	<i>AD EHSMS RF - Element 09</i>
		<p>Regulatory Authorities / Agencies</p> <ul style="list-style-type: none"> • This section shall identify each regulatory agencies and their role that have an interest in the project and how that interaction will be managed. 	
		<p>Interested Parties</p> <ul style="list-style-type: none"> • This section shall identify: <ul style="list-style-type: none"> ○ all other interested parties relevant to the project. These could include other projects / facilities nearby that the construction activity may impact upon or residential areas; and ○ each interested party and also the nature of the interest and how this will be managed. 	<i>AD EHSMS RF - Element 09</i> <i>AD EHSMS RF - Element 03</i> <i>AD EHSMS RF - Element 04</i>

No.	Topic		EHS-CMP Project Specific Requirements	AD EHSMS RF Compliance Reference
4.4	Management of Contractors	Selection and Appointment	<ul style="list-style-type: none"> This section shall identify the procedures that will be utilized to ensure a systematic approach to the selection and appointment of contractors onto the project. This section shall identify the key roles and responsibilities for the selection and appointment of contractors. The procedure shall ensure that all contractors have been reviewed with regards to their competency to complete the roles they are being appointed to undertake and have appropriate resources, both in terms of financial and personnel to competently and safely deliver the task(s). The review shall include, but not limited to, EHS. 	AD EHSMS RF - Element 03
		Ongoing Management	<ul style="list-style-type: none"> This section shall include procedures for the ongoing management of contractors, including formal reviews of performance and reporting. The procedures shall clearly define expectation and timelines for reporting. 	
4.5	EHS Risk Management	Risk Management Procedures	<ul style="list-style-type: none"> This section shall include the specific risk management procedures for the project. The procedures shall be specific to the project and include roles and responsibilities for all key stakeholders. The procedure shall define the methods that shall be used to identify hazards and impacts, how these shall be assessed and subsequently managed. The procedure shall also define the mechanisms for approval along with project specific levels of authority. The procedure shall also include mechanisms to ensure that no activities can be undertaken without prior approval from relevant stakeholders, of the specific risk assessment(s) and method statement(s). 	AD EHSMS RF - Element 02 AD EHSMS RF - Element 03

No.	Topic		EHS-CMP Project Specific Requirements	AD EHSMS RF Compliance Reference
		Project Risk Register	<ul style="list-style-type: none"> This section shall ensure that an overall project risk and impact management plan is developed that incorporates all foreseeable hazards and impacts for the project, including those that are generated through the activities of sub-contractors or other persons on the project. The Risk and Aspects Register shall include reference to method statements that are developed as part of the control measures to reduce the risk or impact. Information on the specific control measures that are to be implemented for any activity that has been defined as medium or high risk / impact following the completion of a robust risk assessment shall be included within this document. 	
		Sub-Contractor Risk Assessments and Method Statements – Review and Approval Process	<ul style="list-style-type: none"> The PC shall also ensure that a review and approval procedure is in place for risk assessments and method statements developed by sub-contractors or other parties involved on the project. 	
		Design Risk – Identification and Control	<ul style="list-style-type: none"> A procedure is required to monitor the stages of design to ensure that EHS is considered during the process. The procedure shall include control measures and mechanisms to demonstrate that EHS has been considered. The plan shall include ongoing mechanisms that will monitor the design and risk management procedures. The PC shall ensure that a robust coordination and communication procedure is in place to manage any changes to the design during the construction phase. The PC shall ensure that any hazards applicable to the construction or end use of the building, related to design are communicated and raised to the client / lead designer. 	<p><i>AD EHSMS RF - Element 02</i></p> <p><i>AD EHSMS RF - Element 03</i></p> <p><i>AD EHS RI – CoP 20.0</i></p> <p><i>AD EHS RI – CoP 53.0</i></p>

No.	Topic		EHS-CMP Project Specific Requirements	AD EHSMS RF Compliance Reference
4.6	Training and Awareness	Project Specific Training and Awareness	<ul style="list-style-type: none"> • This section shall include information on what the project specific training and awareness requirements are. These shall include all general requirements for each individual role, including induction and life safety training, along with any specific training that the role may require, such as harness training for work at height. Included within the plan will be information on; <ul style="list-style-type: none"> ○ a description of the EHS awareness and training program for personnel, contractors, and subcontractors needed to comply with control measures contained within the EHS-CMP; ○ identification of training needs, including general knowledge of the EHS-CMP and activity-specific needs for different activities (eg, the handling of hazardous waste, working at height, operation of certain equipment); ○ identification of the methods that shall be used to disseminate the information required and what the frequencies shall be; and ○ established procedures for maintaining records of all training to be performed, including the name of the person trained, the date of training, the name of the trainer, and a description of the training content. 	AD EHSMS RF – Element 05
		Induction Training	<ul style="list-style-type: none"> • This section shall include a specific section on the induction program for the project. The information shall include, but not limited to; <ul style="list-style-type: none"> ○ information that shall be included within the induction training; ○ procedures for ensuring that all persons that enter the site receive induction training, including visitors, contractors and office based staff; ○ procedures for updating the induction program; and ○ refresher training and intervals. 	

No.	Topic		EHS-CMP Project Specific Requirements	AD EHSMS RF Compliance Reference
		Toolbox Talks	<ul style="list-style-type: none"> This section shall include specific information on the development and delivery of toolbox talks throughout the lifecycle of the project. Toolbox talks shall be delivered to all employees at least once per week and shall be subject specific to the project. They shall also include information relevant to the works ongoing at the time. The procedure shall also include mechanisms for the recording of attendance at toolbox talks. The toolbox talks shall be delivered by persons competent and shall be in a language appropriate to the workforce. 	
4.7	EHS Incidents	Investigation Procedures	<ul style="list-style-type: none"> This section shall include procedures to ensure that all incidents and incidents are investigated by competent persons and appropriate remedial actions identified. The procedures shall include the monitoring and review of all incident and incident reports from sub-contractors or other parties involved on the project. 	AD EHSMS RF – Element 07
		Incident Reporting	<ul style="list-style-type: none"> This section shall include project specific EHS incident notification and reporting procedures, including timescales (internal and external) and responsibilities. These shall also incorporate external reporting to any relevant authorities. It shall also include specific internal procedures to ensure that all EHS incidents are reported and fully investigated. 	
		Hazard and Near Miss Reporting	<ul style="list-style-type: none"> This section shall include a procedure that requires all employees to report hazards and near misses on the project. 	
4.8	Consultation and Communication	Employee / Workforce Involvement	<ul style="list-style-type: none"> This section shall identify how the workforce will be fully involved in the management of EHS, ensuring that the views of the workforce are considered and incorporated where appropriate. Employees shall be allowed to communicate their views and complaints within the project EHS Committee Meeting. 	AD EHSMS RF – Element 04

No.	Topic		EHS-CMP Project Specific Requirements	AD EHSMS RF Compliance Reference
		EHS Meetings	<ul style="list-style-type: none"> • This section shall include information on what EHS meetings will be held during the project lifecycle, including; <ul style="list-style-type: none"> ○ a list of all planned EHS meetings; ○ planned attendees; ○ frequency; ○ Terms of Reference; and ○ suggested agenda(s). 	
		Internal & External Communications	<ul style="list-style-type: none"> • This section shall identify how internal and external communications shall be managed on the project including; <ul style="list-style-type: none"> ○ internal communication at various levels and functions of the entity; ○ communication with contractors and other visitors to the workplace; and ○ receiving, documenting and responding to external communication sources. 	
		Consultation	<ul style="list-style-type: none"> • This section shall identify how consultation with all relevant parties will be managed and controlled, including activities such as; <ul style="list-style-type: none"> ○ participation and consultation activities (eg. EHS Committee); ○ appropriate involvement in hazard identification, risk assessment and determination of controls; ○ appropriate involvement in incident investigation; ○ involvement in the development and review of EHS policies and objectives; ○ consultation in changes that affect EHS (including Contractors); and ○ employee representation on EHS matters. • A procedure to receive and address complaints from external parties. 	

No.	Topic		EHS-CMP Project Specific Requirements	AD EHSMS RF Compliance Reference
		Site EHS Notice Board	<ul style="list-style-type: none"> • The PC shall set up and maintain safety notice boards at appropriate, prominent locations. These notice boards shall be located in positions that are clearly visible to the Contractor's employees and anyone entering the work place. Safety signs shall be selected that describe the appropriate hazards and relevant emergency contact information and shall be in Arabic, English, and the other most common languages of the workforce. All persons shall be made fully aware of the safety signs and the emergency contact information, prior to commencing work on site. • A nominated person shall maintain the Main EHS Site notice boards that shall contain as a minimum: <ul style="list-style-type: none"> ○ Construction License (within 1 year); ○ Form H – Notification of the PC; ○ Project Directory; ○ EHS Policy Statements; ○ Incident Reporting Procedure; ○ Action in the event of Major Incident Notice; ○ Site emergency and evacuation Plan; ○ Visitors Notice; ○ Site Rules; and ○ Lost Time Injury Rate (as per AD EHSMS RF) 	<p><i>AD EHSMS RF – Element 04</i></p> <p><i>AD EHS RI – CoP 17.0</i></p> <p><i>AD EHS RI – CoP 53.0</i></p>
4.9	Monitoring, Inspection and Auditing	General	<ul style="list-style-type: none"> • This section shall include, but not be limited to, information regarding the monitoring and auditing of EHS performance, as well as information on reporting requirements, EHS checklists, and monitoring review, as discussed below. 	<p><i>AD EHSMS RF – Element 08</i></p>

No.	Topic		EHS-CMP Project Specific Requirements	AD EHSMS RF Compliance Reference
	Internal Audit and Inspection		<ul style="list-style-type: none"> • This section shall detail what the specific internal audit and inspection procedures are for the project (including contractors) and how these will be implemented. The procedure shall include as a minimum; <ul style="list-style-type: none"> ○ types of audits and inspections; ○ roles and responsibilities; and ○ frequencies. 	AD EHSMS RF – Element 08
Non Conformance and Corrective Action		<ul style="list-style-type: none"> • The procedure shall include, but not be limited to: <ul style="list-style-type: none"> ○ identifies responsible personnel for the review of monitoring audits and compliance inspections; and ○ establishes procedures, including timelines, for responding to non-compliance findings from these audits and inspections; 		
	EHS Monitoring Requirements		<ul style="list-style-type: none"> • This section shall include information about monitoring requirements for EHS performance. Including as a minimum the following: <ul style="list-style-type: none"> ○ discuss how identified hazards and impacts will be monitored, including the indicators to be measured, the methods to be used, the sampling locations, frequency of measurements, detection limits, the thresholds that trigger corrective actions, and the party who will conduct monitoring; ○ provide procedures that indicate corrective actions for non-compliance with monitoring targets, specifying notification requirements to responsible personnel and the time frames for notification and for corrective actions to be performed; ○ identify the frequency and content of monitoring reports for internal use and those required to be submitted to relevant authorities for review; and ○ ensure that the monitoring activities and reports comply with all relevant authorities' guidelines including health surveillance. 	AD EHSMS RF – Element 07

No.	Topic		EHS-CMP Project Specific Requirements	AD EHSMS RF Compliance Reference
		EHS Reporting Requirements	<ul style="list-style-type: none"> • The EHS-CMP shall outline procedures for reporting requirements, including the frequency and content of required reports, such as the following: <ul style="list-style-type: none"> ○ Pre-operation compliance reports; ○ Incident reports; ○ Periodic or annual performance reports; ○ Auditing reports; ○ Non-compliance reports; ○ Corrective action reports; ○ Complaints management reports; and ○ Any special reports required by government agencies. 	AD EHSMS RF – Element 07
4.10	EHS-CMP Review and Update		<ul style="list-style-type: none"> • This section shall establish procedures for the periodic review of the EHS-CMP to ensure that the plan's contents are correct and that it is being appropriately implemented. • These reviews will ensure that, shall conditions arise that alter the plan's contents or requirements — the EHS-CMP remains updated to reflect these changes. This shall include, but not limited to: <ul style="list-style-type: none"> ○ demonstrate how the proponent intends to keep the EHS-CMP as a “live” document, capable of modification during the project's life cycle and as circumstances dictate; ○ indicate who will regularly review, update, and develop the EHS-CMP as construction progresses; and ○ outline procedures for the periodic review of the EHS-CMP to ensure that its contents are correct and that it is being appropriately implemented. 	AD EHSMS RF – Element 09

No.	Topic	EHS-CMP Project Specific Requirements	AD EHSMS RF Compliance Reference
4.11	EHS File	<ul style="list-style-type: none"> • An EHS file shall be developed for the project and shall be handed over to the client upon practical completion of the project. • The EHS file may form part of the Operation and Maintenance (O&M) manuals developed for the project. • The EHS file shall be developed in line with the project phasing and shall be reviewed on a continual basis by a competent person. The minimum contents for the EHS File shall include; <ul style="list-style-type: none"> ○ a brief description of the work carried out; ○ residual hazards and how they have been dealt with; ○ project directory listing all key parties involved in the project; ○ key structural principles incorporated in the design of the structure (for example bracing, sources of substantial stored energy – including pre or post tensioned members) and safe working loads for floors and roofs; ○ any hazards associated with the materials used; ○ information regarding the removal or dismantling of installed plant and equipment; ○ EHS information about equipment provided for cleaning or maintaining the structure; ○ the nature, location and markings of significant services, including fire-fighting services; and ○ information and as-built drawings of the structure, its plant and equipment. 	

Section – Five – Project Specific Information

As part of the EHS-CMP the plan shall include procedures for managing and mitigating risk, which may include, but not be limited to, the elements described in the following subsections. The plan shall thoroughly address site-specific control measures for the applicable EHS components. Note that it is not sufficient to solely provide a list of reasonably practicable control measures that will be used at the contractor's or subcontractor's discretion; the EHS-CMP must include control measures that will be performed and that can be audited to determine their effectiveness.

No.	Topic	EHS-CMP Project Specific Requirements	AD EHSMS RF Compliance Reference
5.1	Site Security Plan and Access Control	<ul style="list-style-type: none"> • This section shall define what the security risks for the project are and how these will be controlled and managed. As a minimum the plan shall discuss; <ul style="list-style-type: none"> ○ control of the boundary of the project; ○ access and egress points; ○ crowd control; ○ security checks; ○ visitor control; and ○ shift work and control of night work. 	
5.2	Project Permit to Work Procedures	<ul style="list-style-type: none"> • This section shall detail what arrangements the PC shall implement to control the issue and management of internal permits and authorizations. • The PC shall ensure that one permit and authorization procedure is implemented for the entire project and all other parties adhere to this requirement. 	AD EHS RI – CoP 21.0

No.	Topic	EHS-CMP Project Specific Requirements	AD EHSMS RF Compliance Reference
5.3	Traffic Management Plan	<ul style="list-style-type: none"> • The Traffic Control Plan shall outline control measures to minimize the impacts on local traffic from the construction activities. • Discuss the control measures to minimize traffic disturbances and associated impacts from noise. • Identify access roads for construction vehicles and safety control measures used for pedestrian access and crossings. • Describe the procedures for public notification of any anticipated traffic-related concerns, such as street closings. • Discuss how traffic will be managed within the project, ensuring; <ul style="list-style-type: none"> ○ one way traffic systems are implemented as far as reasonably practicable; ○ reversing is prohibited unless under competent supervision; ○ loading and drop off areas are clearly defined and manageable; ○ appropriate access is available at all time for emergency access; ○ ongoing review in line with the project phasing; ○ project parking and control; ○ delivery timings and applicable restrictions; ○ vehicle maintenance and wash-down; and ○ segregation of pedestrians and traffic. 	<p><i>AD EHS RI – CoP 25.0</i></p> <p><i>AD EHS RI – CoP 44.0</i></p> <p><i>AD EHS RI – CoP 53.0</i></p>
5.4	Material Storage Plan	<ul style="list-style-type: none"> • This section shall define how the materials required for the project will be stored within the project premise and shall account for the phasing of the project. • If materials are to be stored on floor slab(s) the floor loadings must be calculated and displayed. • The plan shall also consider the need to access the materials, in line with the project phasing. 	<p><i>AD EHS RI – CoP 44.0</i></p>

No.	Topic	EHS-CMP Project Specific Requirements	AD EHSMS RF Compliance Reference
5.5	Identification and Management of Asbestos and other Hazardous Materials / Substances	<ul style="list-style-type: none"> This section of the plan shall detail the procedures in place to identify Asbestos Containing Materials (ACMs) and other hazardous materials/substances and hazardous waste materials that may be present. 	AD EHS RI – CoP 1.1
5.6	Site Safety Rules	<ul style="list-style-type: none"> The PC shall develop and control a minimum set of site safety rules that shall be followed by all persons entering the site. These shall be displayed at the entrance to the site and at locations across the project. 	
5.7	Emergency Management Plan (Including First Aid)	<ul style="list-style-type: none"> The PC shall develop procedure to manage any emergency situations that may arise on the project. The plan shall include information on the identification of emergencies. The procedures shall also include the provision of first aid and medical facilities on the project. Emergency procedure shall include firefighting arrangement, assembly points, as well as notification & reporting procedure to management & local authorities 	AD EHS RI – CoP 4.0 AD EHS RI – CoP 6.0 AD EHS RI – CoP 7.0
5.8	Manual Handling Operations	<ul style="list-style-type: none"> This section shall define the arrangements that will be implemented to control any hazards and risks that arise from manual handling operations within the project. All persons that are engaged on the project shall receive manual handling training that is specific to their role and undertakings. The training shall be refreshed on a regular basis. 	AD EHS RI – CoP 14.0
5.9	Working at Height	<ul style="list-style-type: none"> This section shall identify what the arrangements are for controlling work at height. 	AD EHS RI – CoP 23.0
5.10	Fixed and Temporary Electrical Installations	<ul style="list-style-type: none"> The section shall include information on how the PC will control fixed and temporary electrical Installations. PC shall arrange all temporary installations with 110 volts power supply. For other devices which require high voltage PC shall prepare procedures including permit to work requirements and certified competent personnel 	AD EHS RI – CoP 15.0

No.	Topic	EHS-CMP Project Specific Requirements	AD EHSMS RF Compliance Reference
5.11	Personal Protective Equipment	<ul style="list-style-type: none"> The PC shall implement mechanisms to ensure that all persons who enter the site, including office employees and visitors have basic PPE. The PC shall develop a procedure to manage all PPE requirements for the project and shall ensure that all sub-contractors or other parties including the project team adhere to this procedure. 	AD EHS RI – CoP 2.0
5.12	Plant and Equipment	<ul style="list-style-type: none"> This section shall define the arrangements that the PC will implement to control all Plant and Equipment that is to be used on the project. Plant and equipment shall also include portable power tools and hand tools. This shall also include shared plant and equipment. 	AD EHS RI – CoP 35.0 AD EHS RI – CoP 36.0 AD EHS RI – CoP 47.0 AD EHS RI – CoP 51.0
5.13	Housekeeping Arrangements	<ul style="list-style-type: none"> This section shall include information on how the PC shall ensure appropriate housekeeping standards on the project. This shall include, where relevant, information on the separation of waste and appropriate storage. Information shall be included on the number of operatives that will be allocated to housekeeping duties. 	AD EHS RI – CoP 8.0
5.14	Lifting Equipment and Lifting Operations	<ul style="list-style-type: none"> This section shall include information on how the PC will control lifting operations and lifting equipment on the project. This will include ensuring any independent testing and certification is in place prior to lifting being undertaken. The procedure shall include mechanisms for the review and approval of lifting plans prior to any lifts being undertaken. 	AD EHS RI – CoP 34.0
5.15	Welfare and Site Accommodation	<ul style="list-style-type: none"> This section shall include information on how the PC will control and manage all site welfare and accommodation. 	AD EHS RI – CoP 18.0
	Existing Structures / Structural Issues	<ul style="list-style-type: none"> This section shall highlight what, if any, the impact of the works will be on any existing structure or any structural issues and how this will be controlled. 	
5.16	Scaffolds and Ladders	<ul style="list-style-type: none"> This section shall include information on how the PC shall ensure the safe erection, use, maintenance of all scaffold and ladders on the project. 	AD EHS RI – CoP 22.0 AD EHS RI – CoP 37.0

No.	Topic	EHS-CMP Project Specific Requirements	AD EHSMS RF Compliance Reference
5.17	Cantilevers and Platforms	<ul style="list-style-type: none"> • These sections shall identify the procedures that will be implemented to ensure safety, in line with the applicable regulatory requirements. 	
5.18	Formworks and Structures		AD EHS RI – CoP 40.0
5.19	Roofs		AD EHS RI – CoP 23.0
5.20	Excavations and Trenches		AD EHS RI – CoP 29.0
5.21	Confined Spaces		AD EHS RI – CoP 27.0
5.22	Demolition and Decommissioning		AD EHS RI – CoP 53.0
5.23	Piling		AD EHS RI – CoP 46.0
5.24	Electrical and Gas Welding		AD EHS RI – CoP 21.0
5.25	Gas Cutting		AD EHS RI – CoP 28.0
			AD EHS RI – CoP 49.0
5.26	Working over or Adjacent to Water		AD EHS RI – CoP 31.0
5.27	Mobile Equipment		AD EHS RI – CoP 36.0
5.28	Portable Tools		AD EHS RI – CoP 35.0
			AD EHS RI – CoP 36.0
5.29	Falling Objects		AD EHS RI – CoP 22.0
5.30	Slips Trips and Falls		AD EHS RI – CoP 23.0
		AD EHS RI – CoP 8.0	
5.31	Animals and Reptiles		
5.32	Workplace Bullying and Violence	AD EHS RI – CoP 13.0	
5.33	Impacts / Hazards from Adjacent Activities	<ul style="list-style-type: none"> • This section of the plan shall detail any impacts that may arise from activities on or adjacent to the site during construction. These activities may include; <ul style="list-style-type: none"> ○ partial occupation / use of the building / facility during construction; ○ nearby schools / playgrounds; ○ retail malls / shops; ○ use of hazardous materials nearby; ○ other construction activities; and ○ surrounding land use. 	AD EHSMS RF – Element 02

No.	Topic	EHS-CMP Project Specific Requirements	AD EHSMS RF Compliance Reference
5.34	Temporary Works	<ul style="list-style-type: none"> • The PC is responsible for the safe construction and use of all Temporary Works conducted on all projects they control, regardless of whether they are carried out by a contractor. • Temporary Works must: <ul style="list-style-type: none"> ○ be designed and the design must be checked; ○ the physical works must be inspected to demonstrate compliance with the design; ○ all checks and inspections must be recorded in writing and be demonstrable; and ○ all changes must be referred to the designer and checker. 	<p><i>AD EHSMS RF – Element 02</i></p> <p><i>AD EHS RI – CoP 43.0</i></p> <p><i>AD EHS RI – CoP 20.0</i></p>
5.35	Existing Services	<ul style="list-style-type: none"> • The PC must allow for making all enquiries, giving all notices, locating, protecting, upholding and maintaining all existing live mains and services under or over the site including providing all necessary temporary support and diversions. 	<p><i>AD EHS RI – CoP 39.0</i></p>
5.36	Services Coordination	<ul style="list-style-type: none"> • This section of the plan shall set out the arrangements that will be implemented to ensure safety when working on, or adjacent to, live services. These arrangements may be issued as a procedure / site instruction or included as an appendix and referenced herein. 	<p><i>AD EHS RI – CoP 39.0</i></p>

No.	Topic		EHS-CMP Project Specific Requirements	AD EHSMS RF Compliance Reference
5.37	Occupational Health Arrangements	Noise and Vibration	<ul style="list-style-type: none"> • This section shall outline control measures to minimize the impacts on local noise levels and vibrations from the construction activities and shall accomplish the following: <ul style="list-style-type: none"> ○ identify the appropriate noise suppression or abatement control measures required to ensure that ambient noise level concentrations do not exceed established limits for both employees on site and for nearby receptors; ○ identify any restrictions – eg. working hours where noisy works cannot be undertaken; ○ discuss the control measures that will be employed to minimize vibration and the procedures that will be used to notify potentially impacted receptors about these operations; and ○ where applicable, personal vibration hazards shall be considered. 	<p><i>AD EHS RI – CoP 3.0</i></p> <p><i>AD EHS RI – CoP 3.1</i></p>
		Temperature and Heat Stress	<ul style="list-style-type: none"> • This section shall identify the arrangements to manage heat stress and working in high temperatures. 	<p><i>AD EHS RI – CoP 11.0</i></p>
		Radiation (Ionizing and Non-ionizing Radiation)	<ul style="list-style-type: none"> • This section shall identify how the PC shall identify all sources and what control measures shall be implemented. 	<p><i>AD EHS RI – CoP 1.0</i></p>
		Lighting and Ventilation	<ul style="list-style-type: none"> • This section shall identify the procedures that will be implemented to ensure safety, in line with the applicable regulatory requirements. 	<p><i>AD EHS RI – CoP 8.0</i></p>
		Biological Agents	<ul style="list-style-type: none"> • This section shall identify how the PC shall identify all sources and what control measures shall be implemented. 	<p><i>AD EHS RI – CoP 1.0</i></p>
		Pest(s)	<ul style="list-style-type: none"> • This section shall identify the procedures that will be implemented to ensure safety, in line with the applicable regulatory requirements. 	<p><i>AD EHS RI – CoP 8.0</i></p>
		Health Surveillance and Management Plan	<ul style="list-style-type: none"> • This section shall detail any site specific health surveillance programs that are to be developed for the project. These plans shall be above the normal medical procedures that are required for all projects and shall be in response to specific health hazards on the project. 	<p><i>AD EHS RI – CoP 5.0</i></p> <p><i>AD EHS RI – CoP 9.0</i></p>

No.	Topic		EHS-CMP Project Specific Requirements	AD EHSMS RF Compliance Reference
5.38	Environmental Arrangements	Waste Management Plans	<ul style="list-style-type: none"> • The PC shall develop plans to ensure all projects waste are managed and disposed of correctly, including: <ul style="list-style-type: none"> ○ Segregation, minimization, reuse and recycling; ○ solid waste management; ○ liquid waste (effluent) management; ○ hazardous waste management; and ○ use of approved Service Providers. 	AD EHS RI – CoP 54.0
		Soil, Water and Groundwater Pollution Protection	<ul style="list-style-type: none"> • This section shall outline control measures to manage and minimize the impact of the project on soil and groundwater. This plan shall include, but not be limited to, the following information: <ul style="list-style-type: none"> ○ Dewatering activities ○ containment area's (bundling); ○ washing area for concrete mixing trucks and pumps; ○ wheel wash; and ○ oil spill combatting. 	AD EHS RI – CoP 55.0
		Air Pollution Protection	<ul style="list-style-type: none"> • Dust emissions / suppression program. • Air emissions. 	AD EHS RI – CoP 55.0

Appendix A: Example Risk Assessment Form

Risk Assessment

General Information

Company Name: _____

Project Name: _____

S/N	Activity	Hazard	Potential Harm/Damage	Risk Rating			Control Measure (Refer to Hierarchy of Control)	Residual Risk			Risk Acceptable	
				Probability (P)	Severity (S)	Rating (P X S)		H	M	L	Yes	No

Date Prepared: _____

Conducted by: _____
(Signature over printed Name)

(Signature over printed Name)

Approved by: _____
(Signature over printed Name)

Risk Assessment

Risk Grading Matrix

PROBABILITY	SEVERITY				
	Insignificant (1)	Minor (2)	Moderate (3)	Major (4)	Catastrophic (5)
Rare (1)	1	2	3	4	5
Possible (2)	2	4	6	8	10
Likely (3)	3	6	9	12	15
Often (3)	4	8	12	16	20
Frequent/Almost Certain (5)	5	10	15	20	25

15 - 25	Extreme Risk	Absolutely Unacceptably High Activity or industry should not proceed in current form
8 - 12	High Risk	Unacceptably High Activity or industry should be modified to include remedial planning and action and be subject to detailed EHS assessment
4 - 6	Moderate Risk	Acceptable but must be managed at "As Low As Reasonably Practicable" (ALARP) Activity or industry can operate subject to management and / or modification
1 - 3	Low Risk	Acceptable without required further action No action required unless escalation of risk is possible

Hierarchy of Control (Controls identified may be a mixture of the hierarchy in order to provide minimum operator exposure)

Elimination	Eliminate the hazard.
Substitution	Provide an alternative that is capable of performing the same task and is safer to use.
Engineering Controls	Provide or construct a physical barrier or guard or technical measures
Administrative Controls	Develop policies, procedures practices and guidelines, in consultation with employees, to mitigate the risk. Provide training, instruction and supervision about the hazard.
Personal Protective Equipment	Personal equipment designed to protect the individual from the hazard.

Appendix B: Example EHS Induction Form

EHS Induction

General Information

Company Name:

Project Name:

Inductee's Name:

Induction Date:

Topics to discuss

S/N	Description	YES	NO	Remarks
1	Project Description			
2	Company EHS Policy			
3	Emergency Procedures (<i>alarm system, first aid boxes, assembly point, evacuation plan, escape routes, fire warden, first aiders</i>)			
4	Introduction of Key Personnel			
5	Site Layout and welfare Facilities (<i>rest area, toilet, etc.</i>)			
6	Site Rules (<i>e.g. drug & alcohol & smoking policy, different signage, no horse playing, wearing PPEs, wearing Jewelries, etc.</i>)			
7	Environment & Waste Disposal			
8	Site Specific Hazards / Risks / Near Miss			
9	Vehicles on site (<i>traffic management</i>)			
10	Permit To Work			
11	Risk Assessment / Risk Register			
12	Accident Reporting			

Other Relevant Topics for Discussion (if applicable)

1	Management of Change (new process, equipment & machineries, procedures, etc.)			
2	Relevant & applicable laws, regulations			

Signature & Remarks

Employee's Signature:

Remarks:

Conducted by : _____

Job Title : _____

Signature : _____

Remarks:

Note: For guidance and it is not limited to its content

EHS Induction

FOR GUIDANCE

Note: For guidance and it is not limited to its content

Appendix C: Example Tool Box Talk Form

Tool Box Talk

General Information

Company Name: _____

Project Name: _____

Date: _____ Location: _____

A. Specific job to be carried out: _____

B. Topics Discussed:

- 1. _____
- 2. _____
- 3. _____
- 4. _____
- 5. _____
- 6. _____

C. Name and Signature of workers attended

Name	Signature	Name	Signature

Conducted by:

Name : _____
Job Title : _____
Signature : _____

Note: For guidance and it is not limited to its content

Appendix D: Example Site Inspection Checklist Forms

Traffic Management Checklist

General Information

Company Name:		Project Name:	
Conducted By:		Date:	

Poor: Absence of major control measures (high risk), work to be stopped and risk assessment to be reviewed immediately.
Fair: Some minor controls are missing (medium risk), additional control measures to be implemented.
Good: All required controls are in place (low risk), only monitoring is required.

Description

Item	Evaluation				Remarks <i>(insert your observation, and proposed corrective action plan)</i>
	Good	Fair	Poor	N/A	
Advance warning signs boards.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Roadwork signs boards.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Guide signs boards.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Digital or LED* signs boards.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Arrows signs boards.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Delineators.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Cones.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Tubular flexible posts (bollards).	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Painted pavement markings.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Raised pavement markings.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Water filled plastic barriers.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Concrete barriers.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Longitudinal crashworthy barriers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Warning lights (flashing lights & beacons).	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Street lighting.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Temporary traffic lights.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Rumble strips	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Crash cushion (shock absorber)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Buffer zones	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Note: For guidance and it is not limited to its content

Traffic Management Checklist

Tapers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Flaggers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Pedestrian walkways.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Construction lane access / egress	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Fences	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Glare screens	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Turning radius and lane width.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Approved By:

Position	Name	Date	Signature
EHS Officer / Manager			

Distribution and Acknowledgment:

Project Manager			
Project Engineer			

Confined Spaces Checklist

General Information

Company Name:		Project Name:	
Conducted By:		Date:	

Poor: Absence of major control measures (high risk), work to be stopped and risk assessment to be reviewed immediately.
Fair: Some minor controls are missing (medium risk), additional control measures to be implemented.
Good: All required controls are in place (low risk), only monitoring is required.

Description

Item	Evaluation				Remarks <i>(insert your observation, and proposed corrective action plan)</i>
	Good	Fair	Poor	N/A	
Hazards identified, risk evaluated, assessed & communicated before commencement of work.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Permit To Work implemented & posted in place.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Mechanical and / or electrical isolation of the confined space done.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Adequate ventilation to ensure a sufficient supply of air conducted.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Cleaning & purging to remove all hazardous (flammable & or toxic) gases & fumes performed.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Testing of oxygen concentration conducted to acceptable standard level.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Detecting of flammable & or toxic gases conducted to ensure their absence or below minimum levels.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Provision of emergency retrieval system (full body harness, tripod and hoist)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Availability of the backup personnel or rescue attendants.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Use of non spark tools / devices (intrinsically safe tools or devices).	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Sufficient lighting is available.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Proper PPE & SCBA (Self Contained Breathing Apparatus) is used.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Suitable access / egress provided.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Area or surrounding isolated with barriers & or cones and suitable signage in place (where applicable).	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Approved By:

Position	Name	Date	Signature
EHS Officer / Manager			

Distribution and Acknowledgment:

Project Manager			
Project Engineer			

Electrical Installation Checklist

General Information

Company Name:		Project Name :	
Conducted By:		Date:	

Poor: Absence of major control measures (high risk), work to be stopped and risk assessment to be reviewed immediately.
Fair: Some minor controls are missing(medium risk) , additional control measures to be implemented
Good: All required controls are in place (low risk), only monitoring is required

Description

Item	Evaluation				Remarks <i>(insert your observation, and proposed corrective action plan)</i>
	Good	Fair	Poor	N/A	
Electrical hazards identified and all associated risks have been assessed.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Permit To Work (PTW) is used & available on site for electrical work.					
All electrical installations commissioning and repairing carried out by competent electricians	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
All electrical installation and appliances comply with the relevant international standards (BS)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
All external electrical installations are weather proof	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
All electrical installations provided with Earth Leakage Circuit Breakers (ELCB).	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
All distribution boards are locked and signed	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Cables/wires running across the site are in good condition, properly protected & checked regularly.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Cables are free of joints, & only industrial sockets used for extending cables.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
No naked wires inserted into electrical sockets, & only earthed & fused plugs to be used.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Sockets are not overloaded.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Level of lighting suitable for the task.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Tag out / lock out system implemented	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Approved By:

Position	Name	Date	Signature
EHS Officer / Manager			

Distribution and Acknowledgment:

Project Manager			
Project Engineer			

Note: For guidance and it is not limited to its content

Environment Checklist

General Information

Company Name:		Project Name:	
Conducted By:		Date:	

Poor: Absence of major control measures (high risk), work to be stopped and risk assessment to be reviewed immediately.
Fair: Some minor controls are missing(medium risk) , additional control measures to be implemented
Good: All required controls are in place (low risk), only monitoring is required

Description

Item	Evaluation				Remarks <i>(insert your observation, and proposed corrective action plan)</i>
	Good	Fair	Poor	N/A	
Waste is segregated & collected at designated appropriate areas (hazardous from non-hazardous) & adequate waste containers/skips provided.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Waste is removed /disposed regularly & according to the Abu Dhabi Waste Center guidelines.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Proper oil/chemicals leakage & spill control in places (tanks bunding, dripping trays, oil spill response materials).	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Allocation of designated area for washing concrete mixers & pumps.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Proper collection & disposal of waste water & sewage water.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Proper management of noise generated from the project, by installing noise enclosure measures (e.g. silencers, & work scheduling).	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Dust and/or fumes control measures have been implemented.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Regular maintenance for mobile equipment, vehicles & machines.					

Approved By:

Position	Name	Date	Signature
EHS Officer / Manager			

Distribution and Acknowledgment:

Project Manager			
Project Engineer			

Note: For guidance and it is not limited to its content

Excavations Checklist

General Information

Company Name:		Project Name:	
Conducted By:		Date:	

Poor: Absence of major control measures (high risk), work to be stopped and risk assessment to be reviewed immediately.
Fair: Some minor controls are missing(medium risk) , additional control measures to be implemented.
Good: All required controls are in place (low risk), only monitoring is required.

Description

Item	Evaluation				Remarks <i>(insert your observation, and proposed corrective action plan)</i>
	Good	Fair	Poor	N/A	
Hazards have been identified and risk evaluated and assessed.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Suitable access / egress provided.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Falling protection system installed properly (i.e. barriers, stop blocker, toe boards, cones and warning tapes...etc).	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Appropriate supporting system / method (shoring, buttering, or stepping)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Spoil heaps stable and kept in safe distance from the edge of trenches	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Oxygen tested and gases levels within acceptable level (for excavation with depth more than 1.2 meter).	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Emergency preparedness plan developed, communicated and implemented	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Proper signage & warning lights (warning signs, tapes,...etc) and instructions (i.e. PTW, emergency notice ..etc) displayed.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Underground services identified, located, & all required permissions obtained & displayed visibly.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Excavators are in good working condition	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Proper training and awareness delivered to all involved employees (i.e. toolbox talk & specialized training).	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Approved By:

Position	Name	Date	Signature
EHS Officer / Manager			

Distribution and Acknowledgment:

Project Manager			
Project Engineer			

Note: For guidance and it is not limited to its content

Fire & Emergency Checklist

General Information

Company Name:		Project Name:	
Conducted By:		Date:	

Poor: Absence of major control measures (high risk), work to be stopped and risk assessment to be reviewed immediately.
Fair: Some minor controls are missing(medium risk) , additional control measures to be implemented
Good: All required controls are in place (low risk), only monitoring is required

Description

Item	Evaluation				Remarks <i>(insert your observation, and proposed corrective action plan)</i>
	Good	Fair	Poor	N/A	
Fire risk assessment of the project is carried out & the control measures implemented.					
Proper storage of flammable / combustible materials.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Good housekeeping practices & daily removal of waste.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
No smoking / no naked flame policy. Smoking designated area allocated.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Permit To Work (PTW) procedure for hot works.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Evacuation plan developed & distributed. Emergency numbers, names of fire wardens & first aiders posted & communicated.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Adequate means of escape allocated & unobstructed.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Suitable / sufficient fire fighting equipments located on site maintained & inspected regularly.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Suitable fire alarming system available, maintained & tested regularly.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Emergency signage & assembly points are in places & communicated to all parties.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Proper awareness / training & regular fire drills.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Adequate first aid kits & trained first aiders	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Approved By:

Position	Name	Date	Signature
EHS Officer / Manager			

Distribution and Acknowledgment:

Project Manager			
Project Engineer			

Note: For guidance and it is not limited to its content

Hazardous Substances Checklist

General Information

Company Name:		Project Name:	
Conducted By:		Date:	

Poor: Absence of major control measures (high risk), work to be stopped and risk assessment to be reviewed immediately.
Fair: Some minor controls are missing(medium risk) , additional control measures to be implemented
Good: All required controls are in place (low risk), only monitoring is required

Description

Item	Evaluation				Remarks <i>(insert your observation, and proposed corrective action plan)</i>
	Good	Fair	Poor	N/A	
Properly stored, ventilated, isolated, & suitable signs displayed.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Material Safety Data Sheet (MSDS) available, and communicated to concerned personnel.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Adequate / sufficient fire fighting equipments are in place.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Emergency escape & breathing apparatus available, tested and in good condition	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Appropriate PPE is provided to the worker and it is worn during the work.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Hazardous substances containers/drums have eligible labeling & protected from leakage or spillage.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Empty hazardous substances containers, drums & receptacles should be properly maintained & controlled.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Approved By:

Position	Name	Date	Signature
EHS Officer / Manager			

Distribution and Acknowledgment:

Project Manager			
Project Engineer			

Housekeeping Checklist

General Information

Company Name:		Project Name:	
Conducted By:		Date:	

***Poor:** Absence of major control measures (high risk), work to be stopped and risk assessment to be reviewed immediately.*
***Fair:** Some minor controls are missing (medium risk), additional control measures to be implemented.*
***Good:** All required controls are in place (low risk), only monitoring is required.*

Description

Item	Evaluation				Remarks <i>(insert your observation, and proposed corrective action plan)</i>
	Good	Fair	Poor	N/A	
Clear and safe access to work area.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Proper materials stacking and any loose materials have been properly secured.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Site offices and the site area in general cleanliness and orderliness	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Construction waste and debris collected in designated areas.					
Adequate rubbish containers and rubbish removed daily.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Old timber de-nailed & all steel bars capped.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Site & site office in general cleanliness & orderliness.					

Approved By:

Position	Name	Date	Signature
EHS Officer / Manager			

Distribution and Acknowledgment:

Project Manager			
Project Engineer			

Ladders Checklist

General Information

Company Name:		Project Name:	
Conducted By:		Date:	

Poor: Absence of major control measures (high risk), work to be stopped and risk assessment to be reviewed immediately.
Fair: Some minor controls are missing (medium risk), additional control measures to be implemented.
Good: All required controls are in place (low risk), only monitoring is required.

Description

Item	Evaluation				Remarks <i>(insert your observation, and proposed corrective action plan)</i>
	Good	Fair	Poor	N/A	
Properly manufactured (no handmade wooden ladders).	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
All ladders are in good condition & suitable for the task.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Positioned at suitable working angle at 75° to horizontal.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Secured top & bottom, and extended 1 meter above the platform level.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Intermediate landing place provided for ladders rise more than 9 meters.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Ladders placed on firm, flat level base & supported by stiles.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Extendable ladders are properly secured (i.e. extension locked and sufficient overlapping distance)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Rungs clear of grease, oil or other slippery substances.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Metal ladders must not be used in electrical work (fiber glass ladders can be used instead).	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Fixed ladders provided with falling protection cage	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Ladders should be checked before use & regularly maintained.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Approved By:

Position	Name	Date	Signature
EHS Officer / Manager			

Distribution and Acknowledgment:

Project Manager			
Project Engineer			

Note: For guidance and it is not limited to its content

Lifting Equipments and Gears Checklist

General Information

Company Name:		Project Name :	
Conducted By:		Date:	

Poor: Absence of major control measures (high risk), work to be stopped and risk assessment to be reviewed immediately.
Fair : Some minor controls are missing(medium risk) , additional control measures to be implemented
Good: All required controls are in place (low risk), only monitoring is required

Description

Item	Evaluation				Remarks <i>(insert your observation, and proposed corrective action plan)</i>
	Good	Fair	Poor	N/A	
Cranes & slings certified by 3 rd party, inspected & maintained regularly & records maintained.					
Lifting plan / procedure prepared & communicated.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
All lifting equipments & gears are inspected & certified by 3 rd party.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Operator & rigger are competent (third party trained). The driver & operator are licensed.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Slings, wires, ropes, chains, belts, hooks, shackles are in good condition, appropriate for job & inspected regularly & records maintained.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Load charts known & considered before any lifting begins.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Load indicators, alarms & other safety devises are operational.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Ground condition checked & required corrective actions implemented.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Outriggers are operational & sold plate provided.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Lifting operation area barricaded & suitable sign boards are in place.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Approved By:

Position	Name	Date	Signature
EHS Officer / Manager			

Distribution and Acknowledgment:

Project Manager			
Project Engineer			

Note: For guidance and it is not limited to its content

Portable Tools Checklist

General Information

Company Name:		Project Name:	
Conducted By:		Date:	

Poor: Absence of major control measures (high risk), work to be stopped and risk assessment to be reviewed immediately.
Fair: Some minor controls are missing (medium risk), additional control measures to be implemented.
Good: All required controls are in place (low risk), only monitoring is required.

Description

Item	Evaluation				Remarks <i>(insert your observation, and proposed corrective action plan)</i>
	Good	Fair	Poor	N/A	
Electrical Tools:					
Power cables present no hazard or obstruction & connections are appropriate, earthed & fused.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
User competent & authorized.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Guard is fitted, adjusted & tool in good condition.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Emergency stop is available & operational.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Manufacturer instruction is available & followed.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Pneumatic Tools:					
All hoses, couplings & fittings of correct rating.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Hoses, couplings & fittings inspected & maintained regularly.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Tools secured to the hose by positive means to prevent disconnection.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Air supply lines protected from damage, maintained & inspected regularly.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Safety device is provided for air hose with large diameter.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Manufacturer instruction is available & followed.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Manual (unpowered) Tools:					
Tool checked & inspected before use.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Home-made tool is not used & tool fits the job.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Suitable PPE provided for all above types of tools.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Approved By:					
Position	Name	Date	Signature		
EHS Officer / Manager					
Distribution and Acknowledgment:					
Project Manager					
Project Engineer					

Note: For guidance and it is not limited to its content

Personal Protective Equipment (PPE) Checklist

General Information

Company Name:		Project Name:	
Conducted By:		Date:	

Poor: Absence of major control measures (high risk), work to be stopped and risk assessment to be reviewed immediately.
Fair: Some minor controls are missing (medium risk), additional control measures to be implemented.
Good: All required controls are in place (low risk), only monitoring is required.

Description

Item	Evaluation				Remarks <i>(insert your observation, and proposed corrective action plan)</i>
	Good	Fair	Poor	N/A	
PPE policy and signage displayed.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Minimum PPE (i.e. helmet, safety boots, hi-visibility vest, & safety glasses) provided to all employees & records maintained.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
PPE checkpoint on the entrance.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
PPE comply with the relevant international standards & clearly marked (i.e. CE or EN mark).	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Users trained on using, maintenance, and storage of PPE.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Additional PPE have been provided as appropriate for those who are executing critical activities (e.g. full body harness for working at height, full face mask, & respiratory apparatus, etc...).	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
PPE correctly selected based on the task risk assessment.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Regularly inspected, cleaned and maintained and/or replaced as deemed necessary.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Approved By:

Position	Name	Date	Signature
EHS Officer / Manager			

Distribution and Acknowledgment:

Project Manager			
Project Engineer			

Note: For guidance and it is not limited to its content

Scaffolds Checklist

General Information

Company Name:		Project Name :	
Conducted By:		Date:	

Poor: Absence of major control measures (high risk), work to be stopped and risk assessment to be reviewed immediately.
Fair : Some minor controls are missing(medium risk) , additional control measures to be implemented
Good: All required controls are in place (low risk), only monitoring is required

Description

Item	Evaluation				Remarks <i>(insert your observation, and proposed corrective action plan)</i>
	Good	Fair	Poor	N/A	
All scaffolds erected, inspected, altered & dismantled by competent team.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Clear and visible signage and scaff-tag	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Access ladder provided and properly secured	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Sound scaffolding materials free of damage	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Platforms are properly made of planks, free of damage, tied & no gaps between planks/timbers.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
All platform blanks tied down properly	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Proper overlap platforms over suitable support	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Proper falling protection provided (guard rail/hand rail, mid rail, toe board, mesh/bricks guard & safety net).	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Scaffolding properly secured ties, and all braces properly installed.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Sole/base plate or timber provided.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Overhead protection provided.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Mobile scaffold provides with guard rails, toe board, full & proper platform, access ladder & wheels locked.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Personal protective equipments provided and properly used (full body harness connected to fixed anchor or life line)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Approved By:

Position	Name	Date	Signature
EHS Officer / Manager			

Distribution and Acknowledgment:

Project Manager			
Project Engineer			

Note: For guidance and it is not limited to its content

Site General Checklist

General Information

Company Name:	Project Name:
Conducted By:	Date:

Poor: Absence of major control measures (high risk), work to be stopped and risk assessment to be reviewed immediately.
Fair: Some minor controls are missing (medium risk) , additional control measures to be implemented.
Good: All required controls are in place (low risk), only monitoring is required.

Description

Item	Evaluation				Remarks <i>(insert your observation, and proposed corrective action plan)</i>
	Good	Fair	Poor	N/A	
Availability of the site safety sign board.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Proper site security and appropriate fencing (e.g. closed metallic boards, hoarding).	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Site visitors induction procedure.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Sufficient site offices and car parking.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Adequate safety signage / notice boards.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Availability of the EHS documents & records(e.g. EHS manual, EHS plan, risk assessment, work permit, incidents reports, induction & toolbox talk records, inspection records, & training records, etc...)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Approved By:

Position	Name	Date	Signature
EHS Officer / Manager			

Distribution and Acknowledgment:

Project Manager			
Project Engineer			

Vehicles and Mobile Equipment Checklist

General Information

Company Name:		Project Name:	
Conducted By:		Date:	

Poor: Absence of major control measures (high risk), work to be stopped and risk assessment to be reviewed immediately.
Fair: Some minor controls are missing (medium risk), additional control measures to be implemented.
Good: All required controls are in place (low risk), only monitoring is required.

Description

Item	Evaluation				Remarks <i>(insert your observation, and proposed corrective action plan)</i>
	Good	Fair	Poor	N/A	
Vehicles & mobile equipment are licensed by concerned authority .	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Driver/operator is licensed and competent.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Engine in good operational condition.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
No visible leaks	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Windows & mirrors are clean & obstruction free.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Seat is in good condition and seat belt functioning properly.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Lights / indicators / wipers / horns properly operational	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Tyres free of damage and fully inflated	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Reversing alarm & beacons working properly	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Periodical inspection & maintenance & record kept	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Provided with fire extinguisher and first aid box, and in good condition	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Provided with the noise silencer/enclosure.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Approved By:

Position	Name	Date	Signature
EHS Officer / Manager			

Distribution and Acknowledgment:

Project Manager			
Project Engineer			

Note: For guidance and it is not limited to its content

Welding and Gas Cutting Checklist

General Information

Company Name:		Project Name:	
Conducted By:		Date:	

Poor: Absence of major control measures (high risk), work to be stopped and risk assessment to be reviewed immediately.
Fair: Some minor controls are missing (medium risk), additional control measures to be implemented.
Good: All required controls are in place (low risk), only monitoring is required.

Description

Item	Evaluation				Remarks <i>(insert your observation, and proposed corrective action plan)</i>
	Good	Fair	Poor	N/A	
General:					
Hazard identification & risk assessment conducted, & required control measures have been implemented.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Valid & approved permit to work available all time & displayed in visible location.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Working area properly contained & warning signs displayed.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
All flammable / combustible materials have been removed from the working area or properly protected from spark.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
All possible health effects (acute and chronic) have been identified and proper control measures implemented.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Sufficient ventilation has been provided.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Task is carried out by competent person (s).	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Adequate / sufficient fire fighting equipment are available in the working area during & after the work.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Suitable PPE provided and used all the time.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Electrical Arc Welding:					
Welding leads and returns cables have the same length, properly installed & protected, & free of damage.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Electrical cables are in good condition, free of damage, & properly protected.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Industrial plugs & sockets provided.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Electrode holders are fully insulated & free of damage.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
All earth connection bolted or clamped to ensure a good electrical contact.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Note: For guidance and it is not limited to its content

Welding and Gas Cutting Checklist

Welding machine frame effectively grounded.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Gas Welding and Cutting:					
Different gas cylinders are clearly identified and marked.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Different types of Gas cylinders have been separated, properly stored, and not exposed to direct sun.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Proper training on handling gas cylinders for all users (this will include clothing, moving cylinders, hazards and precaution measures....etc).	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Cylinder attachments (regulators, hoses, non-return valves, flashback arrestors, blowpipes) are maintained in good working order and free of damage.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Approved By:

Position	Name	Date	Signature
EHS Officer / Manager			

Distribution and Acknowledgment:

Project Manager			
Project Engineer			

Welfare Facilities Checklist

General Information

Company Name:		Project Name:	
Conducted By:		Date:	

Poor: Absence of major control measures (high risk), work to be stopped and risk assessment to be reviewed immediately.
Fair: Some minor controls are missing (medium risk), additional control measures to be implemented.
Good: All required controls are in place (low risk), only monitoring is required.

Description

Item	Evaluation				Remarks <i>(insert your observation, and proposed corrective action plan)</i>
	Good	Fair	Poor	N/A	
Adequate ablutions / toilets / washing facilities.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Appropriate clean & cool rest area with clean & cold drinking water.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Food storage facility.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Changing rooms with facility for keeping protective clothing used at work (locker).	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Prayer area clearly identified & kept clean all the time	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Safe access & egress to and from the facility	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Welfare facilities are in clean good hygienic condition.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Designated smoking area with proper fire fighting equipments	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Approved By:

Position	Name	Date	Signature
EHS Officer / Manager			

Distribution and Acknowledgment:

Project Manager			
Project Engineer			

Working Platforms and Cantilevers Checklist

General Information

Company Name:		Project Name:	
Conducted By:		Date:	

Poor: Absence of major control measures (high risk), work to be stopped and risk assessment to be reviewed immediately.
Fair: Some minor controls are missing (medium risk), additional control measures to be implemented.
Good: All required controls are in place (low risk), only monitoring is required.

Description

Item	Evaluation				Remarks <i>(insert your observation, and proposed corrective action plan)</i>
	Good	Fair	Poor	N/A	
Platform is properly designed (the minimum dimension are in accordance with the safety standards) and suitable for the purpose.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Platform free of damage and in good condition.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
All platform blanks tied down properly with no gaps between planks.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Proper falling protection provided (handrail, mid-rail, toe board, boy harness, lifeline & safety net).	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Load capacity identified and clearly marked.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Platforms are not used to carry another platform.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Adequate bracing / outriggers installed (Mobile Elevated Working Platforms MEWP).	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3 rd party inspection. Regular maintenance & adherence to the manufacturer's manual (MEWP & cradles).	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Cantilever provided with guard rail, mid rail, toe board, & mesh / bricks guard.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Cantilever should not be loaded (apply only tested load).	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Cantilever must be inspected whenever installed, altered, or shifted by competent person.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Proper PPE should be provided.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Approved By:

Position	Name	Date	Signature
EHS Officer / Manager			

Distribution and Acknowledgment:

Project Manager			
Project Engineer			

Note: For guidance and it is not limited to its content

Machinery Checklist

General Information

Company Name:		Project Name:	
Conducted By:		Date:	

Poor: Absence of major control measures (high risk), work to be stopped and risk assessment to be reviewed immediately.
Fair: Some minor controls are missing (medium risk), additional control measures to be implemented.
Good: All required controls are in place (low risk), only monitoring is required.

Description

Item	Evaluation				Remarks <i>(insert your observation, and proposed corrective action plan)</i>
	Good	Fair	Poor	N/A	
Machine maintained in good working order regularly and records kept on site.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Machine operated according to the manufacturer instructions.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Competent operators trained and certified.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Good overall condition and regular maintenance.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Suitable guard provided	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
All electrical installations are protected and free of damages (circuit breakers, plugs, wires).	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Protection against weather condition.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Emergency stop button and other safety devices are operational and clearly marked.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Safety signs and manufacturer instructions clearly displayed and properly followed.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Suitable PPE provided and properly used	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Approved By:

Position	Name	Date	Signature
EHS Officer / Manager			

Distribution and Acknowledgment:

Project Manager			
Project Engineer			

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