**Project:**

|  |  |  |
| --- | --- | --- |
| **Kick-off Meeting Date:** |  |  |
| **(Sub)-contractor Name:** |  |  |
| **Description of Contract / Activities** |  |  |
|  |  |  |
|  |  |  |
| Location of Activities |  |  |
|  |  |  |

#### (Sub)-contractor Representatives

Name (Block Capitals) Signature

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#### Contractor’ Representatives

Name (Block Capitals) Signature

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Minutes of meeting to be recorded and kept with (sub-) contract file.

Suggested agenda attached.

## SUGGESTED AGENDA

# General

(Sub)-contractors safety statement

Contractor’s safety policy

(Sub)-contractors and Contractor’s nominated representative(s) – contact details

Reporting arrangements

Drugs & alcohol policy & medical screening

Accident/incident reporting

Work areas and safe walking routes

Emergency response plans

Monitoring of safety

# Occupational Issues

* Eating area
* Washroom locations
* Emergency procedures including fire & first aid
* (Sub)-contractor employee identification
* Security measures

# General hazards

* Electrical Works
* Mechanical works
* Work at height
* Confined Space
* Excavation Works
* Lifting Operation activities
* Hot Works
* To be added

# Contract activities

* Review the programme of work
* Review risk assessments and method statements from the sub-contractor
* Unusual hazards
* Special working conditions
* Special equipment
* PPE requirements: high visibility clothing, foot/head/ear/eye/hand protection
* Special training requirements – workplace familiarisation, personal site safety, induction

# Permits

* Identify and issue any special permits required

# Any other business

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Minutes of meeting** | | | | |
| **Item** | **Description** | **Person in Charge** | **Action** | **Action/Date** |
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