Contractor and Visitor Management Guide

Promoting Work Health and Safety in the Workplace
The South Australian Mining and Quarrying Occupational Health and Safety Committee

Promoting Work Health and Safety in the Workplace
This workplace industry safety resource is developed and fully funded by the Mining and Quarrying Occupational Health and Safety Committee (MAQOHSC).

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AIM

Our Contractor Management Program will allow *(insert Mine Operator name)* to control all visitors to the site, including their plant and equipment. It will ensure that visitors and contractors are suitably trained and equipped, and that their plant and equipment is safe and fit for purpose for the work being carried out.

1. WHAT

All persons visiting the site, whether for private or commercial reasons, will be controlled by our Contractor Management Program. This will be achieved by ensuring that all persons are made aware of their health and safety requirements, including equipment standards.

Each category of visitor / contractor will be controlled according to the level of risk they will be exposed to on site.

2. WHO

People who enter the site and do not go past the ___________________ will be controlled by way of our entry signs and are not required to complete any form of induction.

If people proceed past the ___________________, they will be managed depending on their category. Table 1 indicates who will be able to complete the various types of induction.

3. HOW

Each contractor / visitor will be assessed against the following table to determine the type of induction required. If the company representative believes the contractor / visitor may be exposed to a higher risk category, then nothing shall prevent them from insisting that the contractor / visitor complete a higher category of induction. Contractors are required to participate in the consultation process.
<table>
<thead>
<tr>
<th>VISITOR TYPE</th>
<th>WHO (example)</th>
<th>TYPE OF CONTROL</th>
<th>BY WHO</th>
<th>FREQUENCY</th>
<th>FORM</th>
</tr>
</thead>
<tbody>
<tr>
<td>Low risk</td>
<td>• Visitors</td>
<td>• Site rules (verbal)</td>
<td>Anyone trained</td>
<td>Per visit</td>
<td>Visitors Induction</td>
</tr>
<tr>
<td></td>
<td>• Salespersons</td>
<td>• Stay in company of employee</td>
<td></td>
<td>Per visit</td>
<td>Visitors sign in register</td>
</tr>
<tr>
<td></td>
<td>• Industry representatives</td>
<td>• Personal Protective Equipment (PPE)</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td></td>
<td>• Government Officers</td>
<td>• Visitors sign in register</td>
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<td></td>
<td>• Office equipment, cleaners and catering contractors</td>
<td>• Other</td>
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<tr>
<td>Medium risk</td>
<td>• Trucking contractors</td>
<td>• Site induction</td>
<td>Area Manager e.g. Maintenance Manager or trained person</td>
<td>Once a year</td>
<td>Contractor / Visitor Induction - Section 1</td>
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<tr>
<td></td>
<td>• Electrician</td>
<td>• Evidence of competency</td>
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<td>• Boilermaker</td>
<td>• Insurances</td>
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<td>• Personal Protective Equipment (PPE)</td>
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<td>• Check equipment</td>
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<td>• Copy of Safe Work Method Statements</td>
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<td>• Other</td>
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<tr>
<td>High risk</td>
<td>• Major contractors</td>
<td>• As per medium risk, plus</td>
<td>Senior most person in management structure</td>
<td>Per project</td>
<td>Contractor / Visitor Induction – Section 1 and 2</td>
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<tr>
<td></td>
<td>• Drilling / Blasting</td>
<td>• Approved Contractor Safety Management Plan (if required)</td>
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<td></td>
<td>• Contract crushing</td>
<td>• Other</td>
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<td></td>
<td>• Project work</td>
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<td></td>
<td>• Any activity considered high risk</td>
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</table>

Table 1: Visitor risk categories

4. WHEN

Each person entering the site will be controlled by the Induction Program suitable to their risk, at a frequency according to the table above. A refresher course will be conducted by ____________ to notify contractors / visitors of any changes to the Mine Safety Management Plan.

Prior to engaging a contractor of medium or high risk they will undergo a Contractor Pre-work Assessment. Contractors on site will be inspected as per Contractor Management Procedure.

5. ACTION

If, during the course of completing an induction, the contractor / visitor brings to the attention of the company representative any additional hazards or issues, the company representative will ensure that a Hazard Report Form is completed and submitted.
6. DOCUMENT CONTROL

All inductions completed under medium risk and high risk categories will be signed by the contractor / visitor and the ______________________ will transfer their name onto the Induction Register.

Each person being inducted will keep a copy of the site safety rules. The Induction Form will be filed within the Induction Register __________________________.

FURTHER ASSISTANCE

MAQOHSC Work Health and Safety Specialists are available to provide further advice and assistance on all Work Health and Safety matters.

MAQOHSC Work Health and Safety Specialists are able to be contacted via our website at www.maqohsc.sa.gov.au or email maqohsc@sa.gov.au.

ADDITIONAL INFORMATION

Work Health and Safety Legislation, Codes of Practice, fact sheets, Health and Safety Representatives (HSR) information and guides can be found at the following websites:

SafeWork SA – www.safework.sa.gov.au or call 1300 365 255

Safe Work Australia – www.safeworkaustralia.gov.au or call 1300 551 832

REFERENCES

Work Health and Safety Act 2012 (SA) Section 19 - Primary duty of care
Work Health and Safety Regulations 2012 (SA) Regulation 39 – Provision of information, training and instruction
Work Health and Safety Variation Regulations 2013 (SA) Regulation 622(f)
Welcome to (insert site name)

While you are visiting our site we are responsible for your health and safety. These site rules summarise the work practices that apply to our site. The nominated company representative will read through this document with you and will discuss any issues that arise. Visitors will be directly supervised at all times whilst on site.

- The person responsible for your supervision is ______________________.
- You must sign in and out every time you visit this site.
- First aid kits are located at ______________________.
- Trained first aiders are listed on notice boards located at ______________________.
- In the case of an emergency, follow the emergency procedure and all instructions from your supervisor.
- Emergency assembly points are located at ______________________.
- You can only visit those areas as directed by the company representative responsible for your supervision.
- You must use personnel protective equipment (PPE) as indicated by signs on site or as directed by the company representative.
- You must report to your nominated company representative when you arrive on site.
- Please be aware of mobile plant at all times.
- All traffic will abide by the site speed limit, which is ________ km/h.
- If you see any hazards on site you are required to report them immediately to the company representative responsible for your supervision and record them on a Hazard Report Form.
- You may be selected to undergo fitness for work testing during your visit. This includes breath alcohol, drug screen and hydration testing.

Do you have any illnesses that may affect you during your visit?
____________________________________________________________________________

Are you taking any medications that may affect you during your visit?
____________________________________________________________________________

I have read and understood the above rules and agree to comply with these conditions.

Name: ______________________ Signature: ______________________ Date:        /       /

Work Health and safety Resource Manual
Visitors Sign in Register Template

<table>
<thead>
<tr>
<th>Date</th>
<th>Name</th>
<th>Company</th>
<th>Person visiting and/or task to perform</th>
<th>No. hours worked prior</th>
<th>Time in (arrive)</th>
<th>Time out (depart)</th>
<th>Signature on departure</th>
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</table>
Contractor and Visitor Induction Checklist

This induction is to be completed by any contractor or visitor that is considered a medium or high risk. This form is to be completed by an authorised company representative.

SECTION 1

To be completed by medium risk high risk (circle risk category)

<table>
<thead>
<tr>
<th>Contractor / visitor name</th>
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<tbody>
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<table>
<thead>
<tr>
<th>Name of company or trade name</th>
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</table>

<table>
<thead>
<tr>
<th>Contact details</th>
</tr>
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<tbody>
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<table>
<thead>
<tr>
<th>Date of induction</th>
</tr>
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<tbody>
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<td></td>
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</table>

<table>
<thead>
<tr>
<th>Person completing induction</th>
</tr>
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<tbody>
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<td></td>
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<table>
<thead>
<tr>
<th>Type of work being carried out</th>
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</table>

The following items will be discussed with the new contractor / visitor:

You need to check: (✓ or x)

- The contractor / visitor will receive a copy of the site rules
- Isolation procedure
- Drug and alcohol policy
- Traffic controls and restrictions
- Reporting of accidents and incidents
- Reporting of hazards
- Relevant Safe Work Method Statements (SWMS)
- Relevant Safety Data Sheets (SDS)
- Other issues________________________

Operating equipment

Where a contractor is bringing equipment on to site, a competent authorised company representative will inspect the equipment the first time it arrives to ensure that it meets the company’s equipment standards. The competent authorised company representative will conduct regular inspections to confirm that the equipment is maintained to this standard.
You need to check: ( ✓ or x )

Necessary licences / permits are held (record details)  
_________________________

☐ Have power tools been checked recently (tagged by electrician)?

☐ Are flashback arrestors fitted to oxy-acetylene equipment?

☐ ______________________

☐ Has operator to be competent

☐ Are first aid facilities available for the full duration of the job?

☐ Are compliant fire-fighting facilities available?

☐ Does mobile plant conform to site Standards?

☐ Has entry / exit to the site been agreed (after hours work)?

☐ Does mobile plant conform to site Standards?

☐ Has an assessment of the hazards associated with the work been carried out?

☐ Roll over protection system (ROPs) Canopy (except for road trucks, drills, excavator)?

☐ Safe Work Method Statements provided?

☐ All safety guards fitted?

☐ Safety Data Sheets provided?

☐ Seatbelt fitted and in good condition?

☐ I have reviewed and discussed the material in section 1 of this Contractor and Visitor Induction with the company representative.

☐ Fire extinguisher fitted and charged?

☐ Other issues ______________________

☐ Reverse alarm operational?

☐ Safe Work Method Statements provided?

☐ All vehicle systems operational?

☐ Safety Data Sheets provided?

☐ Has entry / exit to the site been agreed (after hours work)?

☐ Has an assessment of the hazards associated with the work been carried out?

I have reviewed and discussed the material in section 1 of this Contractor and Visitor Induction with the company representative.

Signed: Contractor / visitor _________________________________ Date _________

Signed: Authorised company representative _________________________ Date _________
SECTION 2

To be completed by **medium and high risk only**

Where a contractor is conducting work that is classified as a medium or high risk due to:

- The complexity and size of the project;
- The requirement for increased supervision; and
- The fact that the work requires greater technical knowledge.

Senior management will require the contractor to prepare and provide a Contractor Safety Management Plan of their own, including an assessment of risks associated with the work to be carried out by the contractor at the site.

I have supplied to _________________________ a copy of our Contractor Safety Management Plan and Safe Work Method Statements. These documents include an assessment of the risks associated with the work to be carried out.

Signed Contractor: ___________________________ Date __________

I have reviewed the Contractor Safety Management Plan using the Contractor Safety Management Assessment Form and Safe Work Method Statements and found them to be acceptable.

Signed Senior Manager on site: ___________________________ Date __________