**CHECKLIST 01**

Contractor: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_

| **No.** | **HSE Plan Requirement** | **Location?** | **Accepted? - Improvement opportunity** | **QAPCO Sign** | **Partner Sign** |
| --- | --- | --- | --- | --- | --- |
| 1 | HSE Management System or process, Method statement submitted? |  |  |  |  |
| 2 | Organization Chart available? |  |  |  |  |
| 3 | HSSE officers interviewed & approved |  |  |  |  |
| 4 | Minimum qualification / TBI of work force ensured? |  |  |  |  |
| 5 | Project related key performance indicators of contractor |  |  |  |  |
| 6 | HSE Statistics of last 3 years which shall include fatality, LTI,MTC, FA, Fire were provided & reviewed? |  |  |  |  |
| 7 | Reports of Near Miss, Incidents, Vehicle incidents etc reviewed? |  |  |  |  |
| 8 | Provided detailed Emergency Response Plans & reviewed? |  |  |  |  |
| 9 | Provided sample of detail incident/ near miss investigation procedure & reviewed? |  |  |  |  |
| 10 | Provided detailed incident analysis for last year & reviewed? |  |  |  |  |
| 11 | Demonstrated their understanding of the HSSE requirements for the contract & approved? |  |  |  |  |
| 12 | Demonstrated that it has independently identified and assessed the hazards / risks to and from QAPCO anticipated during the execution of the contract; |  |  |  |  |
| 13 | Described how they will manage the specific hazards / activities; |  |  |  |  |
| 14 | Did the contractor describe HSE training system and identify specific training needed for the execution of this contract? |  |  |  |  |
| 15 | Clearly defined the selection criteria for selection of sub-contractor and suppliers? |  |  |  |  |
| 16 | Set HSEQ objectives and/or targets for the contract with the overall aim to ensure no harm to people, the environment and the assets? |  |  |  |  |
| 17 | Described how compliance with QAPCO HSE requirements will be measured and achieved? |  |  |  |  |
| 18 | Provided & verified HSE training plan & verified training records? |  |  |  |  |
| 19 | The list of chemicals used, complete with MSDS shared & reviewed? |  |  |  |  |
| 20 | Defined working hour’s policy and welfare facilities? |  |  |  |  |
| 21 |  |  |  |  |  |

Is Current HSE Plan Accepted by QAPCO? Y/N \_\_\_\_\_

|  |  |  |  |
| --- | --- | --- | --- |
| QAPCO HSEQ Approver Name | QAPCO HSE Approver Title | QAPCO Approver Signature | Date |