

Health and Safety Pack covering
Partial Demolition Works
at
Plot 5, Yew Tree Farm, Farnley Tyas,
Huddersfield, HD4 6UQ



on behalf of

manage:construct:achieve
building success

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Appendix 1

Shortform CPP

Registered Office

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CONSTRUCTION PHASE PLAN (SHORTFORM)

Client	MCA Limited				
Principal Contractor	MCA Limited				
Description of Project	Partial Demolition of Plot 5				
Location of Project	Yew Tree Farm Farnley Tyas Huddersfield HD4 6UQ				
A&E Hospital	Huddersfield Royal Infirmary Acre Street Huddersfield HD3 3EA Tel: 01422 342000				
Projected Start and Completion Dates	TBA (5 day duration)				
Site Working Hours	07:30 – 17:30				
Principal Contractor Duties/Project Specifics	• Plan, manage, monitor and coordinate the construction work. • Consult and engage with workers and any contractors regarding health, safety and welfare during the works. • Provide a site induction. • Arrange a Permit to Work (if stipulated as part of site control measures). • Arrange disconnection of all building services (lighting, small power and fire alarm) within our work area. • Arrange access to suitable welfare facilities. • Ensure the works area is secured to prevent unauthorised access.				
Name and Contact Details of N&R Site Supervisor	Carl White Redacted				
Name and Contact Details of PC Site Manager	Dean Atkinson Redacted				
Sub-Contractors on site	<table><tr><td></td><td></td></tr><tr><td></td><td></td></tr></table>				
Site Welfare Arrangements	Clients site facilities available				

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CONSTRUCTION PHASE PLAN (SHORTFORM)

Minimum Personal Protective Equipment (task dependent)	• Hi-Viz • Steel toe cap boots • Safety Helmets • Light Eye Protection • Cut Proof Gloves • Hearing Protection • Respiratory Protective Equipment • Safety Harness/Lanyard
Site Access and Parking Arrangements	On site parking available.
Site Security	Client Heras Fencing
Coordination of Contractors	Daily site meeting to be held to discuss the planned work and identify any potential interface issues or new hazards.
Site Inductions	PC to give induction to all N&R personnel and any sub-contractors prior to start of their work. Each worker to sign Induction Register/RAMS before starting work on site.
Site Inspections	Site Supervisor will accompany PC during site inspections (PC to confirm frequency).
Site Rules	Observe PC Site Rules at all times • DO NOT ENTER THE WORKS AREA UNLESS AUTHORISED TO DO SO • PPE to be worn at all times • No Smoking within site boundary • Work from approved access only (Man-Rider) • Report any safety concerns to Site Supervisor at first instance
Risks Present on Site	
Working at Height	See Risk Assessment for Control Measures
Manual Handling	
Use of Hand and Power Tools	
Possibility of Live Services	
Trips and Slips	
Manual Handling	
Dust	
Presence of Asbestos	
Use of Mobile Crane	
Unplanned Structural Collapse	

Appendix 2

Method Statement

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Method Statement

Reference Number:	MS/YTF/003	Site Location:	Plot 5, Yew Tree Farm, Farnley Tyas, Huddersfield, HD4 6UQ
Author(s):	Tony Hardman (07579 773037)		
Activity Under Consideration:	Demolition Works – Partial Removal of Roof and Gable End		

Step	Description	Activities Required	Remarks
	Introduction	N&R Demolitions and Industrial Dismantlers Limited (hereinafter referred to as N&R) have been appointed by MCA Limited (hereinafter referred to as MCA or the Client) to demolish a range of structures on the Yew Tree Farm development. This method statement and our corresponding risk assessment ref RA/YTF/003 sets out our proposed safe system of work for the partial removal of the roof (above the gable end) and demolition of the structurally unsound gable end and adjacent wall sections on Plot 5. Prior to commencement of the works the Client is to block up an existing window and construct a timber frame/install propping beneath the existing roof truss/joist (see included photo at Page 8). The demolition work shall be completed using hand demolition techniques and will incorporate the use of a Mobile Crane and Man-Rider basket. Recovered slates shall be carefully placed in Client provided slate boxes and the stone placed/stockpiled adjacent to the point of work.	At the time of writing the N&R Site Supervisor shall be Carl White (07540 428586) who shall take charge of the works and be responsible for the management and co-ordination of all related Health and Safety matters pertaining to our work. Client Contact is Dean Atkinson (07531 8122823). Any minor and reasonable changes to the sequence or methodology of work shall be agreed on site and this method statement hand amended to reflect the change. Where such changes are deemed to be significant a new method statement shall be produced.

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Reference Number : MS/YTF/003

Step	Description	Activities Required	Remarks
1.0	Pre Commencement	Attend site and report to the Client. Undertake Pre-Job Brief and complete a site familiarisation walkabout to include: - the general site layout, - the mobile crane rigging position, - the designated vehicular parking/skip laydown areas, - confirmation that any surface mounted services have been disconnected (Client to complete), - confirmation that the timber frame/suitable propping has been installed beneath the relevant roof truss/joist, - confirmation that the window has been bricked up, - identify any workplace hazards which cannot be removed, - agree the sequence of works, - establish individual roles and responsibilities.	All operatives are to be present at the Pre-Job Brief and are to fully understand the scope of work, their own obligations and those of their colleagues during completion of the work. They shall acknowledge receipt of the pre-job brief by signing the appropriate section prior to commencement of the work. Where new workers join the working party the Supervisor shall brief them. Additional briefs shall be provided where conditions to the working environment or methodology result in change. Banksman will be required to oversee lifting operations.
2.0		Offload and rig the mobile crane in accordance with the lifting plan.	Access to the work area be restricted to Authorised Persons throughout completion of the work.
3.0	Demolition Works	Erect Client Heras fencing to form a Demolition Exclusion Zone. Climb into the man-rider basket and attach fixed length lanyard to the approved anchor point.	
4.0		Raise the basket to sit level with the roof ridge.	
5.0		Remove the ridge tiles to expose the upper row of slates.	Place the ridge tiles in the man-rider basket.

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Reference Number : MS/YTF/003

Step	Description	Activities Required	Remarks
6.0		Working from within the man-rider basket at all times proceed to remove all identified roofing slates placing them in the man-rider basket. Regularly lower the man-rider basket to ground level and transfer the removed slates into the Clients slate boxes (or stack in the agreed area).	The extent of roofing to be removed will be agreed with the Client as the work progresses.
7.0		With the identified slates now removed use appropriate equipment (recip saw or chain saw) to cut through the purlins before carefully passing them down to ground based operatives. Once sufficient purlins have been removed, cut through and lift down the first rafter.	Place all removed timbers on company transport or (where they are to be retained) place in a designated area.
8.0		Again, working from the man-rider basket at all times hand demolish the gable end and sections of front and rear walls up to the next rafter. Regularly lower the man-rider basket to ground level and transfer the removed stone onto the Clients pallets (or stack in the agreed area).	
9.0		Repeat above steps to systematically remove the remaining roof timbers and identified stone work (including the door arch etc) up to the installed frame/props.	With the identified section of building now demolished remove undertake a final tidy of the point of work.
10.0	<i>Final Inspections</i>	Arrange a Client inspection and with his approval received, derig the mobile crane, load and remove all demolition plant and equipment, secure the site fencing and demobilise.	Banksman to oversee all collection/removal operations.

END OF METHOD STATEMENT

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Approvals and Acknowledgements

Method Statement Approved/Acknowledged By (N&R)		Method Statement Acknowledged By (Client)	
Name		Name	
Signature		Signature	
Date		Date	

Confirmation of Completed Works

I hereby confirm that all works have been completed in accordance with Client requirements.

Name	
Position	
Signature	
Date	

Should 'snagging' / additional work be evident please list on the Site Notes section (attached to this method statement).

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Reference Number : MS/YTF/003

Comments and Specific Site Hazards Which May Affect Safe Completion / Changes to the Specification

The N&R Site Supervisor is to brief the contents of the above referenced method statement to all personnel engaged in completion of the identified work who must then sign below to acknowledge receipt of the Pre-Task Briefing.

I certify that I have read and explained the attached safety documentation to the personnel listed below and that the following comments have been raised:

(Name and signature of N&R Site Supervisor)

Safety Questions Employer Instructions, Additional Work, Changes in Methodology and / or Comments Raised During Briefing and Recommended Actions

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Worker Acknowledgements

We the undersigned hereby confirm that we have received a Pre Task briefing of the work.

We fully understand that if for any reason work cannot be completed as per the method statement all work must stop allowing us to seek guidance from our Site Manager or the Client.

Name	Signature	Company	Date

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N&R DEMOLITIONS
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Site Photos



Client to Install Props Beneath Identified Truss and Block up Window



Gable End of Plot 5

Appendix 3

Risk Assessments, Checklists & COSHH

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RISK ASSESSMENT - INITIAL APPRAISAL FORM

SITE LOCATION:	Plot 5, Yew Tree Farm, Farnley Tyas, Huddersfield, HD4 6UQ
JOB DESCRIPTION:	Demolition Works – Partial Removal of Roof and Gable End
DATE:	22 March, 2025
Iss No:	01

RISKS / HAZARDS IDENTIFIED	PERSONS AT RISK					SEVERITY BEFORE APPLYING CONTROL MEASURES (✓)					LIKELIHOOD WITHOUT CONTROL MEASURES (✓)					UNMITIGATED (WITHOUT CONTROL MEASURES)	MITIGATED (WITH CONTROL MEASURES APPLIED)
	Emp	YP	Con	Pub	Vis	Fatal	Major	Minor	Negligible	None	Cert	Prob	Poss	Remote	Improb	Risk Rating	Risk Rating
						5	4	3	2	1	5	4	3	2	1	Severity x Likelihood	Severity x Likelihood
1 Personal Access / Egress	✓	✓	✓	✓	✓			✓					✓			3 x 3 = 9 (Medium)	3 x 2 = 6 (Low)
2 Manual Handling	✓							✓					✓			3 x 3 = 9 (Medium)	3 x 2 = 6 (Low)
3 Tripping / Slipping	✓		✓		✓			✓					✓			3 x 3 = 9 (Medium)	3 x 2 = 6 (Low)
4 Use of Work Equipment	✓		✓			✓							✓			5 x 3 = 15 (High)	3 x 3 = 9 (Medium)
5 Work at Height	✓		✓		✓	✓							✓			5 x 3 = 15 (High)	5 x 2 = 10 (Medium)
6 Use of the Mobile Crane	✓		✓		✓	✓							✓			5 x 3 = 15 (High)	5 x 2 = 10 (Medium)
7 Presence of Live Services	✓		✓		✓		✓						✓			4 x 3 = 12 (Medium)	5 x 1 = 5 (Low)
8 Presence of Asbestos	✓		✓	✓	✓		✓						✓			4 x 3 = 12 (Medium)	3 x 2 = 6 (Low)
9 Presence of Dust	✓		✓	✓	✓			✓					✓			3 x 3 = 9 (Medium)	3 x 2 = 6 (Low)
10 Maintaining Structural Support	✓		✓		✓	✓						✓				5 x 4 = 20 (High)	5 x 2 = 10 (Medium)

* Key : Emp = N&R Employees, YP = Young Persons, Con = Contractors, Pub = Public, Vis = Visitors

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Risk Rating Matrix

S E V E R I T Y	5 Fatality	5	10	15	20	25
	4 Major (Broken Bone, In- patient, Occupational disease)	4	8	12	16	20
	3 Minor (Laceration, first aid)	3	6	9	12	15
	2 Negligible (Scratch, bruise etc)	2	4	6	8	10
	1 None	1	2	3	4	5
		1 Improbable (Virtually zero)	2 Remote (Unlikely)	3 Possible (Could Occur)	4 Probable (Occur several times)	5 Certainty (Definitely occur)
		LIKELIHOOD				

Action Priorities	
15-25	HIGH
8-12	MEDIUM
1-6	LOW

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CONTROL MEASURES FOR IDENTIFIED RISKS

HAZARD No.	CONTROL MEASURES	EXISTING INFORMATION Can refer to existing documents	EXISTING TRAINING	BEST PRACTICE	RESULTING RISK WITH CONTROLS APPLIED
1	To restrict unauthorised access the work area shall be contained within Client supplied Heras fencing. Regular checks of the installed fencing to be undertaken and any breaches rectified / made good upon identification). All visitors and contractors are to report to the N&R or MCA Site Supervisor upon arrival and undergo site specific induction. Entry to the demolition area is to be restricted to Authorised Persons only as an escort may be required. PPE including safety footwear and helmets to be worn by all workers and visitors as a condition of entry.	Signage positioned at the point of entry (providing contact details). Site Safety Rules (posted at the point of entry)	Site specific Induction covering relevant working area. Site familiarisation walkdown to be completed to determine emergency exit routes. Competent Persons. Persons working under direct supervision of Competent Person.	HSWA 1974 Mgt of H&S at Work Regs 1999 PPE Regs 1992 HSG 151 Protecting the Public	LOW
2	When moving heavy loads mechanical handling methods (the mobile crane) will be employed to assist. Where this is not possible the operator will plan the lift and proceed as follows: Position feet apart to provide a balanced and stable base from which to lift. Place the leading leg as far forward as possible in the direction the load is to go.	N&R Manual Handling Assessment	As above + Manual Handling Course	As above + Provision and Use of Work Equipment Regs 1998 Lifting Operations and Lifting Equipment Regulations 1998 Manual Handling Operations Regulations 1992.	LOW

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HAZARD No.	CONTROL MEASURES	EXISTING INFORMATION Can refer to existing documents	EXISTING TRAINING	BEST PRACTICE	RESULTING RISK WITH CONTROLS APPLIED
2 cont	When lifting from a low level bend the knees but do not kneel or overflex the knee. Keep the back straight maintaining its natural curve and if necessary lean forward over the load to get a good grip. Keep shoulders level and facing in the same direction as the hips. Keep the load as close to the trunk as long as possible. Lift smoothly – do not jerk Wherever possible operatives are to avoid lifting from the floor or above shoulder height. All components will be size reduced such that they weigh less than 25 kilograms and are neither bulky nor unwieldy. Carrying distances will also be reduced as far as possible. Use a two-man team when removing any heavy items which cannot be size reduced further. In this instance agree which Operative shall control the lift prior to commencement. All tripping and slipping hazards to be removed at first instance. Persons are to be physically fit, be aware of and work to their own limitations.	As above	As above	As above	LOW

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HAZARD No.	CONTROL MEASURES	EXISTING INFORMATION Can refer to existing documents	EXISTING TRAINING	BEST PRACTICE	RESULTING RISK WITH CONTROLS APPLIED
3	All recovered materials are to be cleared from the point of work and stacked/piled in an agreed area at the first possible opportunity. Any spillages, all created tripping hazards and raised edges etc are to be prominently identified or removed at the first instance. Routine inspections are to be undertaken to ensure even ground conditions are maintained throughout the area. Operatives to wear correct safety footwear.	Site Safety Rules (posted at the point of entry)	Site Induction covering relevant working area. Competent Persons. Persons working under direct supervision of Competent Person.	Management of Health and Safety at Work Regs 1999	LOW
4	All hand tools are to be inspected before use, be suitable for the intended application and be in good repair. All handles must be secure and free from damage. Gloves, light eye protection, safety helmets and safety boots shall be worn when using all hand tools. All tools shall be inspected before use and be suitable for the intended application. All portable power tools shall be a maximum of 110v rating (cordless / battery operated tools should be used wherever possible). All mains powered electrical works equipment shall carry a valid inspection certificate.	Manufacturer instructions, operating and service manuals Hand Arm Vibration Assessments.	Site Induction covering relevant working area. Competent Persons. Persons working under direct supervision of Competent Person.	Provision and Use of Work Equipment Regs 1998 PPE Regs 1992 Control of Vibration at Work Regulations, 2005 The Control of Noise at Work Regulations, 2005 Control of Substances Hazardous to Health (COSHH) 2002	MEDIUM

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HAZARD No.	CONTROL MEASURES	EXISTING INFORMATION Can refer to existing documents	EXISTING TRAINING	BEST PRACTICE	RESULTING RISK WITH CONTROLS APPLIED
4 cont	Relevant RPE to be worn during completion of dust generating activities. Where there is a requirement to use hand-held breakers or angle grinders/stihl saw etc worker rotation is to be implemented to reduce risks associated with HAVS. Rotation frequency shall be dependent on the tool and type of use.	As above	As above	As above	MEDIUM
5	All work shall be completed from within the confines of the Man-rider basket. Safety harness and fixed length lanyard to be worn by all operatives positioned within the man-rider basket. The lanyard is to be connected to an approved anchor point at all times. The Man-rider basket shall not be overloaded. The Man-rider basket (and crane) to be inspected every 6 months. Safety helmets are mandatory PPE and are to be worn at all times. All other employees/operatives/visitors are to be made aware of the presence of the MEWP. Barriers may be set up around the immediate works area to segregate personnel from the lifting operations.	Site Safety Rules (posted at the point of entry). Work at Height Risk Assessment. Crane Lifting Plan.	Site Induction covering relevant working area. Persons working under direct supervision of Competent Person.	Work at Height Regs 2005 Provision and Use of Work Equipment Regs 1998	MEDIUM

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HAZARD No.	CONTROL MEASURES	EXISTING INFORMATION Can refer to existing documents	EXISTING TRAINING	BEST PRACTICE	RESULTING RISK WITH CONTROLS APPLIED
6	The mobile crane shall be rigged and operated by competent person in accordance with manufacturer instructions. Banksman to be in attendance during all lifting operations. Clear, firm, level and unobstructed access (providing good all round operator visibility) to be made available in the works area. The crane is to be maintained and inspected (daily) by a competent person. All lifting gear to carry valid inspection and test certification and be inspected by a competent person before use. Lifting gear must be adequately rated for the intended application. Lifting gear must not be lent out and must be safely stored when not in use to avoid potential damage. The crane is to be positioned to avoid known or obvious overhead and buried services. Exclusion Zone to be set up prior to commencement of lifting operations and all unauthorised or non-essential personnel are to be removed from the area.	Crane Lifting Plan.	Competent Persons. Persons working under direct supervision of Competent Person.	BS7121 – Code of Practice for the Safe Use of Cranes Lifting Operations and Lifting Equipment Regs 1998 Workplace Transport Safety HSG 136	MEDIUM

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HAZARD No.	CONTROL MEASURES	EXISTING INFORMATION Can refer to existing documents	EXISTING TRAINING	BEST PRACTICE	RESULTING RISK WITH CONTROLS APPLIED
6 cont	The crane is to be fitted with lights and a horn (which are to be checked as fully operational during use). Skyhooks and tag lines to be used during lowering of items being dismantled.	As above	As above	As above	MEDIUM
7	Any M&E services within the work area shall be isolated/disconnected by the Client to suit the demolition programme.	Site surveys and service drawings.	Site Induction covering relevant working area. Competent Persons. Persons working under direct supervision of Competent Person.	Management of Health and Safety at Work Regs 1999 Provision and Use of Work Equipment Regs 1998	LOW
8	The Client has confirmed the work area is free from asbestos containing materials (ACM's). Notwithstanding should suspect ACM's be identified work shall cease in that particular area allowing independent inspection and sampling of the suspected material.	Client Refurbishment Asbestos Survey (not seen at the time of writing).	Asbestos awareness training Persons working under direct supervision of Competent Person.	Control of Asbestos Regulations 2012 COSHH 2002	LOW
9	Dust suppression equipment (water filled plant sprayer) will be deployed and all non-essential personnel removed from the area during completion of any dust generating activities.	Pre-Commencement assessment of construction materials and area of work/weather conditions.	Face fit tested employees (for employees not wearing a Powered Air Respirator).	Construction Information Sheet No 36 COSHH 1992 FFP3 Dust masks or Powered Air Respirator.	LOW

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HAZARD No.	CONTROL MEASURES	EXISTING INFORMATION Can refer to existing documents	EXISTING TRAINING	BEST PRACTICE	RESULTING RISK WITH CONTROLS APPLIED
9 cont	Relevant RPE to be worn during completion of dust generating activities. The RPE shall be worn by clean shaven, face fit tested personnel and be compatible with other items of PPE. Bearded personnel shall wear a Powered Air Respirator. Regular checks of the working area will confirm procedures and control measures are adequate for the particular task.	As above	As above	As above	LOW
10	The Client is to install additional supports (scaffolding/props) beneath the existing roof truss and block up the adjacent window prior to commencement of the demolition work. All structural supports will be inspected by the Dismantling Operatives prior to commencement of the demolition works to confirm suitability. Main supports will not be removed (unless an alternative method of support is first installed). Roof and wall sections are to be removed in the correct sequence to avoid overloading the structure and ensure structural stability is maintained at all times.	Bright Young Consulting Limited Structural Assessment Report ref 24034/B5 001 r4	Competent Persons. Persons working under direct supervision of Competent Person.	HS(G) 58 Evaluation and inspection of buildings and structures. BS6187 – Demolition Code of Practice.	MEDIUM

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Approvals and Acknowledgements

Risk Assessment Verified / Acknowledged By Client		Risk Assessment Verified / Acknowledged By N&R Supervisor	
Name		Name	
Signature		Signature	
Date		Date	

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Reference Number: RA/YTF/003

Comments and Specific Site Hazards Which May Affect Safe Completion

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Pre-Task Briefing for N&R Risk Assessment RA/YTF/003

The N&R Site Supervisor is to brief the contents of the above referenced risk assessment to all personnel engaged in completion of the identified work who must then sign below to acknowledge receipt of the Pre-Task Briefing.

No work must commence until the review process has been completed as additional documentation may be required.

I certify that I have read and explained the attached safety documentation to the personnel listed below and that the following comments have been raised:

(Name and signature of N&R Site Supervisor)

Safety Questions and / or Comments Raised During Briefing and Recommended Actions

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Worker Acknowledgements

We the undersigned hereby confirm that we have received a Pre-Task briefing of the work.

We fully understand that if additional risks are identified all work must stop allowing us to seek guidance from our Site Manager or the Client.

Name	Signature	Company	Date

POINT OF WORK SAFETY ASSESSMENT

PART 1 - STOP	Permit Number:		Date:		
	Plant Location:				
	Before You Start (tick appropriate box)		Yes	No	N/A
	Do you have the right documentation for the job?				
	Are you at the correct item of plant?				
	Do you have the right PPE for the job?				
	Are the power tools and leads tested?				
	Are scaffold and ladders inspected?				
Is there safe access?					
If you have answered 'NO' to any of the above, take the required action or report to your Supervisor for advice.					
PART 2 - THINK	Safety Assessment				
	If the hazard is present tick the box, circle any you think are inadequately controlled and complete Part 3.				
	Slips, trips and falls on the same level		Entry into a confined space		
	Falls from height		Dust/fumes		
	Falling/flying objects		Asbestos		
	Chemicals/harmful substances		Noise		
	Heat/fire/explosion		Vibration		
	Asphyxiation/drowning		Electricity		
	Risk to plant		Radiation (ionising and non-ionising)		
	Contact with stationary object		Contamination (loose, airborne)		
	Object overturning/collapsing		Poor lighting		
	Manual handling		Temperature (high/low)		
	Stored energy or insecure load		Adverse weather		
	Vehicles		Pinch/trapping points		
	Risk to you from the work of others		Risk to others from your work		
Other(s) (specify)					

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POINT OF WORK SAFETY ASSESSMENT

Additional Safety Assessment			
PART 3 - ACT	Hazard (Circled from overleaf)	Control Measures/Precautions Needed	Remaining risk (High, Medium or Low)*
Low = Take Care Medium = Control measures needed High = STOP – Review task			
PART 4 - REVIEW	End of Job Review		
	Are there any lessons for next time?	Y	N
	Has the work created any new hazards?	Y	N
	If you have answered YES to either of these questions, tell your Supervisor		

Team Sign-On Section		

Registered Office

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Safety Harness/Fall Arrest Lanyard Daily Inspection

Week Ending Sunday	Daily inspection to be carried out before using Safety Harness No													
	Monday		Tuesday		Wednesday		Thursday		Friday		Saturday		Sunday	
Description of Check	Pass	Fail	Pass	Fail	Pass	Fail	Pass	Fail	Pass	Fail	Pass	Fail	Pass	Fail
Any knots in the lanyard, other than those intended by the manufacturer?														
Surface abrasion across the face of the webbing, at the edges and at any loops?														
Cuts to the webbing, rope or stitching?														
Chemical attack which may/ can result in local weakening and softening?														
Heat or friction damage indicated by fibres with a glazed appearance which may feel harder than surrounding fibres?														
Damaged or deformed fittings (e.g. buckles karabiners, screw link connectors, scaffold hooks)?														
UV-degradation? This may be difficult to identify, particularly visually, but there may be some loss of colour (if dyed) and a powdery surface?														
Partially deployed energy absorber (e.g. short pull-out of tear webbing)														
Contamination (e.g. with dirt, grit, sand etc) which may result in internal or external abrasion?														
	Monday		Tuesday		Wednesday		Thursday		Friday		Saturday		Sunday	
PERSON CARRYING OUT INSPECTION TO INITIAL BOX														

ACCOMPANYING NOTES

Any Lanyard that has been used to arrest a fall should never be reused. It should be withdrawn from service immediately and destroyed.

All lanyards should be indelibly and permanently marked (BS EN 365:2004). They should be uniquely identifiable so that they can be easily associated with their respective inspection documentation.

ACTION BY DUTYHOLDERS

Lanyards should be withdrawn from use and passed to a competent person for a detailed inspection to decide whether they should continue to be used or destroyed if:

1. There is no evidence that a lanyard has been inspected by a competent person within the last 6 months;
2. Identification is not evident;
3. A lanyard is still in use and marked to the old British Standard, BS 1397:1979 Specification for industrial safety belts, harness and safety lanyards (i.e. pre CE marking);
4. After a pre-use check or interim inspection, a lanyard is thought to be defective, or if there is any doubt about its safety.

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MANUAL HANDLING ASSESSMENT

Task	
Individuals Completing Task	
Load and Approx Weight	
Environment/Location	
Name of Assessor	
Date of Assessment	

If the answer to a question is 'Yes' place a tick against it and consider the possible action that could be taken to reduce the risk.

THE TASK – DOES IT INVOLVE:	YES	POSSIBLE REMEDIAL ACTION
Holding the load away from the trunk?		
Twisting?		
Stooping?		
Reaching sideways?		
Reaching upwards?		
Large vertical movements?		
Lifting above shoulder height?		
Lifting below the knees?		
Change in posture / position?		
Long carrying distances?		
Strenuous pushing or pulling		
Unpredictable movement of the load?		
Repetitive handling?		
Insufficient rest or recovery?		
A work-rate imposed by a process?		
INDIVIDUAL CAPABILITY - DOES THE ACTIVITY:	YES	POSSIBLE REMEDIAL ACTION
Require unusual capability?		
Create a hazard to those with a health problem?		
Create a hazard to those who are pregnant?		
Call for special training /information etc?		
Is movement or posture hindered by clothing or personal protective equipment?		
THE LOAD – IS IT:	YES	POSSIBLE REMEDIAL ACTION
Heavy?		
Bulky?		
Difficult to grasp?		
Unstable / unpredictable?		
Intrinsically harmful (e.g. sharp /hot?)		
Obstructs vision?		
Is it difficult for the person to obtain assistance when handling difficult or heavy loads		

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**MANUAL HANDLING ASSESSMENT**

THE ENVIRONMENT - ARE THERE:	YES	POSSIBLE REMEDIAL ACTION
Constraints on posture?		
Obstructions?		
Poor floors?		
Variations in levels?		
Hot/cold/humid conditions?		
Strong air movements?		
Poor lighting conditions?		

Other Relevant Comments:

Remedial actions to reduce the risk? [in order of priority]

- 1.
- 2.
- 3.
- 4.
- 5.

Date by which action is to be taken: _____

Overall priority: **LOW/MEDIUM/HIGH**

Date of Assessment: _____ Date for re-assessment: _____

Assessor's Name and Signature: _____

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MANUAL HANDLING ASSESSMENT

Name(s) and Signature(s) of person(s) carrying out the task:

Follow up actions / lessons learned

--

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Working At Height Risk Assessment

Location:	Date:	Person/s undertaking activity:
-----------	-------	--------------------------------

- This risk assessment should be completed prior to any proposed work at height activity.
- This risk assessment should accompany the Client Permit To Work (where issued)
- A Toolbox talk to discuss the task and this assessment must be attended and understood by all persons undertaking the activity.

The activity/operation

Describe the work at height activity/operation being assessed:

What are the foreseeable consequences of a fall? (No injury, minor injury, fatality, etc.) Explain risk

	Assessment factor	Yes	No
	Can the activity/operation be done in a way that avoids work at height?		
	Can the work be carried out from a suitable existing place of work?		
	Does the existing workplace provide means of preventing falls?		
	Does the existing workplace have suitable safe access?		
	Does the work require the use of two hands?		
	Does the work require pushing or pulling?		
	Is the job repetitive in nature?		
	Is the job of short duration (less than 10 minutes)?		
	Will the job be supervised?		
	Does the task require the use of more than one person?		
	Does the task require equipment to be raised to the place of work?		
	Will the work take place where falling objects could injure passers by?		
	Are the ground conditions suitable for a scaffold?		
	Are there any power cables or other overhead restrictions?		
	Are there suitable anchorage points for a ladder or other equipment?		
	Can the risk of falling be eliminated?		
	Can the distance of fall be minimised?		
	Can the consequences of a fall from height be minimised?		
	Will inclement weather affect the safety of the job (high wind, rain, snow, etc.)?		
	What is the distance of fall (in metres)		
	If the activity is just access or egress (e.g. getting onto a raised storage area) what is the distance (in metres) to be travelled?		

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Access equipment

Using the information above select the equipment that should be used for the activity/operation being assessed:

☐ Mobile Elevated Work Platform ☐ Independent scaffold ☐ Tower scaffold ☐ Easidac ☐ Ladder ☐ Stepladder ☐ Podium step ☐ Fall arrest system ☐ Work position equipment ☐ Other (specify opposite)	Briefly explain why this equipment has been selected:
--	---

Assessment factor	Yes	No
Is the equipment adequate for the foreseeable loading of people, equipment and materials?		

Instruction, training and procedures

Assessment factor	Yes	No
Have employees been trained or instructed in the use of the selected equipment?		
If fall arrest equipment is to be used, are there emergency/rescue procedures in place?		
Does the selected equipment require formal inspection periodically and before use?		
Who will carry out the above inspections? (Provide name, job title and contact no.)		

Summary and further/remedial actions

With the appropriate control measures in place this activity/operation is considered to be: ☐ High risk ☐ Medium risk ☐ Low risk

Remedial actions or additional control measure/s required	Date for completion

Assessor(s) name:	Assessor(s) signature:	Date:
Manager/Supervisor must sign below to accept the assessment and ensure that remedial actions are implemented.		
Line Manager/Supervisors name:	Line Manager/Supervisors signature:	Date:

Name	Signature	Name	Signature

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PLANT & EQUIPMENT DAILY INSPECTION CHECKLIST

It is the responsibility of the OPERATOR / DRIVER to ensure this checklist is completed PRIOR to the plant being operated.

Any faults / defects are to be reported and an assessment made as to whether the plant is safe to operate, or the fault needs rectification prior to operation.

If doubt exists, the issue is to be referred to the Supervisor / Site Manager.

WORKPLACE/SITE LOCATION									
PLANT TYPE					REGISTRATION No / SERIAL No				
CONTRACTORS PLANT YES / NO					CONTRACTOR				
OPERATORS NAME (PLEASE PRINT)					DATE				
SAFETY ITEM	MON	TUE	WED	THU	FRI	SAT	SUN	NOTES	
External Lights, Flashing Yellow Light, Warning Devices (Reversing Alarms etc), Mirrors, Signs and present and operational									
Hydraulics – no leaks or damage, connections									
Components – no damage/broken									
Wheels – tyres, loose nuts, wear, suspension									
Pins – pivots, rams, lift arms, bucket pins present, undamaged and lubricated									
Quick hitch mechanism – independent connector secured or additional safety device present									
Guards – All moving parts (gears, belts, drive shafts, Power Take Off's etc) are secure and adequately guarded and warning signs are present and legible									
Condition of – hooks, sheaves, chains, tracks, slings									
Cabin – controls free from obstructions, loose objects removed, seat belts and seats functional, windscreens, warning lights and gauges operational and undamaged									
Other e.g. fire extinguisher, electrical connections, wiring, tow hitch									

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SAFETY ITEM	MON	TUE	WED	THU	FRI	SAT	SUN	NOTES
No excessive rust or loose panels								
IMPORTANT Check around the plant before setting off as site conditions may have changed since it was last used / parked up.								
BEFORE moving off check operation of – brakes, steering controls, wipers, levers, buckets								

OPERATORS SIGNATURE		DATE	
SUPERVISORS SIGNATURE (Random Check)		DATE	

PLANT DEFECT / DEFECT REPORT RECORD

Please complete the following form when reporting any fault or defect identified during completion of the daily plant safety checks or during subsequent operations.

Reported by (who)	Position	Plant Hrs / Kms / Miles
Reported to	Position	Date Reported
DETAILS OF FAULT OR DEFECT		
OPERATORS SIGNATURE		SUPERVISORS SIGNATURE (Random Check)

		COSHH Assessment		Date: 09/05/2024				
				Review Date: 08/05/2025				
Substance used:		Wood Dust						
Manufacturer:		N/A substance is a by-product of soft strip and demolition activities.						
Description of product:		Natural substance in soft and hard forms. Soft wood is sometimes bound together (usually with a urea formaldehyde resin) to form Medium Density Fibreboard (MDF). Softwood dust is not classified as a carcinogen in the UK, although there are concerns about its contribution to respiratory disease at high exposure levels. Hardwood dust, in contrast, is classified as a carcinogen.						
Emergency telephone number		N/A						
Location of process		Various						
Activity being carried out?		General Soft Stripping and Demolition Activities						
Identify the persons at risk:		Employees (including trainees) ☒	Contractors ☒	Public ☒				
Classification under CHIP/CLP								
								
Corrosive	Environment Hazard	Explosive	Flammable	Long Term Hazard	Harmful/Irritant	Oxidising	Toxic	Pressurised Container
			x		x			
Hazard Type								
Gas	Vapour	Mist	Fume	Dust	Liquid	Solid	Other	
				x				
Route of Exposure								
Inhalation		Absorption		Ingestion		Injection		
x				x				
Workplace Exposure Limits (WELs) please indicate n/a where not applicable								
Long-term exposure level (8hrTWA): Soft Wood 5mg/m ³ Hard Wood 3mg/m ³				Short-term exposure level (15 mins): N/A				
State the Risks to Health from Identified Hazards								
Prolonged inhalation of wood dust can lead to the development of respiratory ill health, such as asthma. Dust can cause irritation by abrasion to skin and eyes. Dust can cause gastrointestinal irritation if ingested.								
Control Measures: (for example extraction, ventilation, training, supervision). Take account of those substances that are produced from activities undertaken by another employer's employees.								
Where practicable vacuuming or local exhaust ventilation should be used to remove dust particles. Sweeping or use of compressed air should be avoided. Respiratory protection equipment may be required in addition to engineering controls. Appropriate eye protection should be used to prevent dust entering the eyes. When demolishing, removing or size reducing furniture, ceilings, floors, partitions/walls the normal protective equipment for use on construction sites should be used, in particular safety helmets, safety footwear and abrasive resistant gloves.								
Personal Protective Equipment								
	Safety glasses				Protective gloves			

	FFP3 Dust Mask		Ventilation
	Overalls		
First Aid Measures			
Inhalation: If irritation occurs, remove the affected person to fresh air and seek medical attention if necessary. Skin: wash with soap and water Eyes: irrigate with copious amounts of water and obtain medical attention if irritation persists Ingestion: Swallowing small amounts of dust is unlikely to cause significant reaction. Do not induce vomiting. Give plenty of water to drink and seek medical attention if necessary.			
Fire Precautions			
Hot Works should be restricted until dust levels have reduced to an acceptable level. No smoking within the work area.			
Storage & Handling			
To be removed from point of work at first available opportunity and placed in appropriate waste receptacle (general waste skip).			
Monitoring			
Consider additional monitoring if the duration of exposure is likely to be for long periods of the day when using powered tools. Provide additional monitoring where young or inexperienced workers are carrying out the works.			
Disposal of Substances & Contaminated Containers			
Classed as inert for disposal purposes. Disposal of surplus materials must be in accordance with Duty of Care requirements.			
This assessment must be shown to all operatives working with this material			
Is exposure adequately controlled?		Yes ☒	No ☐
Risk Rating Following Control Measures			
		Low	

		COSHH Assessment		Date: 29/07/2024	
				Review Date: 28/07/2025	
Substance used:		Crystalline Silica Dust			
Manufacturer:		N/A substance is a by-product of soft strip and demolition activities.			
Description of product:		Natural substance found in varying amounts in most rocks			
Emergency telephone number		N/A			
Location of process		Various			
Activity being carried out?		General Soft Stripping and Demolition Activities			
Identify the persons at risk:		Employees <i>(including trainees)</i> ☒	Contractors ☒	Public ☒	
Classification under CHIP/CLP					
					
Corrosive	Environment Hazard	Explosive	Flammable	Long Term Hazard	Harmful/irritant
					x
					
Oxidising	Toxic	Pressurised Container			
Hazard Type					
Gas	Vapour	Mist	Fume	Dust	Liquid
				x	
Route of Exposure					
Inhalation	Absorption	Ingestion	Injection		
x					
Workplace Exposure Limits (WELs) please indicate n/a where not applicable					
Long-term exposure level (8hrTWA): Respirable Crystalline Silica 0.1mg-m3			Short-term exposure level (15 mins): N/A		
State the Risks to Health from Identified Hazards					
Prolonged inhalation of dust can lead to the development of respiratory ill health, in particularly silicosis. Dust can cause irritation by abrasion to skin and eyes. Dust can cause gastrointestinal irritation if ingested.					
Control Measures: <i>(for example extraction, ventilation, training, supervision). Take account of those substances that are produced from activities undertaken by another employer's employees.</i>					
Workplace Exposure Limit (WEL) for respirable crystalline silica = 0.1 mg.m-3 (8hr time weighted average). Where practicable, wet 'spray' systems, vacuuming or local exhaust ventilation should be used. Respiratory protection equipment may be required in addition to engineering controls. Eye protection should be used to prevent dust entering the eyes. When demolishing, removing or size reducing ceilings, floors, partitions/walls the normal protective equipment for use on construction sites should be used, in particular safety helmets, safety footwear and abrasive resistant gloves.					
Personal Protective Equipment					
	Safety glasses with side shields		Protective gloves		
	FFP3 Dust Mask		Ventilation		
	Overalls				

First Aid Measures		
Inhalation: If irritation occurs, remove the affected person to fresh air and seek medical attention if necessary Skin: wash with soap and water Eyes: irrigate with copious amounts of water and obtain medical attention if irritation persists Ingestion: Swallowing small amounts of dust is unlikely to cause significant reaction. Do not induce vomiting. Give plenty of water to drink and seek medical attention if necessary.		
Storage & Handling		
To be dampened down/removed from point of work at first available opportunity and placed in appropriate waste receptacle.		
Disposal of Substances & Contaminated Containers		
Classed as inert for disposal purposes. Disposal of surplus materials must be in accordance with Duty of Care requirements.		
<u>This assessment must be shown to all operatives working with this substance</u>		
Is exposure adequately controlled?	Yes ☒	No ☐
Risk Rating Following Control Measures		
		Low

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**LIFTING PLAN METHOD & RISK ASSESSMENT**

Project					Date				
Site/location					Client				
Document Ref.				/		Rev		Issued by	
Appointed Person carrying out the Assessment:						Date of Assessment:			
N&R Contact:					Phone:	07904 261055		Fax:	
Site Contact:	Frank Dower				Phone:	07904 261055		Fax:	
Description of lift:									

NB 50% reduction in load capability if man basket is used.

Details of Loads	Load Position 1	Load Position 2	Load Position 3
Weight:			
Dimensions:			
Position of C of G:			
Height of lift (worst case only):			
Max. radius (worst case only):			
Date of lift:			
Time of lift:			

Details of Cranes	1st	2nd	3rd
Make & model:			
Capacity:			
Jib length:			
Outrigger spread:			
Outrigger load:			
Max. ground bearing capacity:			
Counterweight:			
Weight of crane:			

Alternative Crane Details

Make & model:			
Capacity:			
Jib length:			
Outrigger spread:			
Outrigger load:			
Max. ground bearing capacity:			
Counterweight:			
Weight of crane:			

Ground Conditions (Visual assessment)

Access/Egress for crane & transport:			
Lifting position:			

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Lifting Accessories

Slings (wire rope):	Slings (webbing):
Slings (chains):	Shackles:
Other Accessories:	

Identification of Hazards

Proximity Hazard	Present?
Overhead power lines	
Other overhead obstacles	
Underground services	
Excavations	
Unstable/ Soft ground	
Hazardous chemicals/materials	
Confined working area	
Restricted access - width	
Restricted access - height	
Other vehicles	

Proximity Hazard (cont.)	Present?
Other hazards identified	
Load Hazard	
Slinging difficulties	
Top heavy	
Sharp edges	
Other hazards identified	

Assessment of Risk

[illegible]

Operational Requirements:
Use designated parking area.

Site Provisions:

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Method Statement

Responsibilities

N&R Demolitions and Industrial Dismantlers Limited will undertake responsibility for the management of this lifting operation using the following personnel.

Title	Name	Title	Name
Appointed Person	Frank Dower	Slinger(s)	
Crane Supervisor		Signaller(s)	
Crane Driver(s)		Crane Erectors	

Note: The appointed person may decide that one person can carry out more than one duty. This does **not** however, include the crane driver who must concentrate on operating the crane.

Lifting Accessories

The lifting accessories, as detailed previously, will be provided by / arranged by N&R Demolitions and Industrial Dismantlers Limited, complete with all statutory documentation.

Weather Conditions

The Appointed Person or, in his absence, the Crane Supervisor, will ensure that the lifting operation only takes place if the weather conditions are within the limits recommended by the crane manufacturer.

Ground Conditions

Have assurances been obtained that the ground can withstand the load?

Yes/No

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**Sequence of Operations**

1	
2	
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Appointed Person's Acceptance of Responsibilities

I confirm that the lifts have been planned and will be carried out in accordance with current legislation and British Standard 7121 and that I accept responsibility for the preparation of this Risk Assessment and Method Statement.

Name:

.....

Signed:

.....

Date:

.....

Crane Supervisor's Acceptance of Duties

I confirm that I have been fully briefed on the contents of this Risk Assessment and Method Statement and that I accept the duty of ensuring that the lift(s) will be carried out in accordance with the method and procedures set out in this document.

Name:

.....

Signed:

.....

Date:

.....

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This image shows a full page of blank graph paper. The grid consists of small, equal-sized squares formed by thin gray lines. There are 20 columns and 20 rows of squares, creating a total of 400 square units. The margins are consistent on all sides, and there are no markings or text on the paper.

Appendix 4

Insurances



DELTA
CORPORATE RISK LIMITED

TO WHOM IT MAY CONCERN

PROOF OF INSURANCE COVER

Client: N & R Demolitions and Industrial Dismantlers Limited
&/or HD Salvage Limited

Address: Suite 2, Unit 1, Craggs Country Business Park
New Road, Cragg Vale
Hebden Bridge
West Yorkshire
HX7 5TT

Business Description: Demolition and dismantling contractors involving industrial dismantling, strip out, demolition and site clearance, plant hire, project/site management, sale and supply of reclaimed materials, incidental building work, excluding offshore activities. Property Owners

Document Produced: 5th July 2024

We act as Insurance agents to the above and the enclosed serves to confirm that the attached classes of cover have been arranged for the periods shown.

Statements have been made in good faith and a resume of the insurance cover in force. This cover is subject to the full terms and conditions of each policy, which are available on request.

We accept no responsibility for any inadvertent or negligent act error or omission on our part in the presentation of such statements or for any loss, damage or expense thereby occasioned to any recipient of this letter.

Please make reference to ourselves should any further information be required.

Redacted

Tom Davies
Senior Account Handler

Redacted



Suite 2 Bailey Court, Green Street,
Macclesfield, Cheshire, SK10 1JQ
T: 01625 668 888
F: 01625 668 899

Mitchell Harper House,
37 High St, Coleshill B46 1AY
T: 01675 463 999
F: 01675 464 237

Certificate of Employers' Liability Insurance^a

(Where required by regulation 5 of the Employers' Liability (Compulsory Insurance) Regulations 1998 (the Regulations), one or more copies of this certificate must be displayed at each place of business at which the Assured employs persons covered by the policy)

Policy Number: 30219/C246394

Assured Name: N & R Demolitions and Industrial Dismantlers Limited
&/or HD Salvage Limited

Date of commencement of Insurance: 9th July 2024

Date of expiry of Insurance: 8th July 2025

We certify that subject to paragraph 2:

1. The policy to which this certificate relates satisfies the requirements of the relevant law applicable in Great Britain, Northern Ireland, the Isle of Man, the Island of Jersey, the Island of Guernsey and the Island of Alderney, or to offshore installations in any waters outside the United Kingdom to which Employers' Liability (Compulsory Insurance) Act 1969 or any amending primary legislation applies^b; and
2. (a) The minimum amount of cover provided by this policy is no less than £5,000,000^c.

Signed for and on behalf of Convex Insurance UK Limited (Authorised Insurer)

Redacted

Signature
Lewis Goodearl
Head of UK & Ireland Casualty
Convex Insurance UK Limited

^a Where the employer is a company to which regulation 3(2) of the Regulation applies, the certificate shall state in a prominent place, either that the policy covers the holding company and all its subsidiaries, or that the policy covers the holding company and all its subsidiaries except and specifically excluded by name, or that the policy covers the holding company and only the named subsidiaries.

^b Specify applicable law as provided for in regulation 4(6) in the regulations.

^c See regulation 3(1) of the Regulations and delete whichever of paragraphs 2(a) or 2(b) does not apply. Where 2(b) is applicable, specify the amount of cover provided by the relevant policy.



DELTA
CORPORATE RISK LIMITED

TO WHOM IT MAY CONCERN

Details of Legal Liability Insurance Policies in Force for:

N & R Demolitions and Industrial Dismantlers Limited
and/or
HD Salvage Limited

EMPLOYERS' LIABILITY

Insurers: Convex Insurance UK Limited

Policy No: 30219/C246394

Period: 9th July 2024 to 8th July 2025, both dates inclusive

Limit of Indemnity: £10,000,000 any one occurrence including costs and expenses

Policy Wording including: Health and Safety at Work Act 1974
Unsatisfied Court Judgments
Court Attendance Compensation

PUBLIC/POLLUTION LIABILITY

Insurers: Convex Insurance UK Limited

Policy No: 30219/C246394

Period: 9th July 2024 to 8th July 2025, both dates inclusive

Limit of Indemnity: £5,000,000 each and every claim, unlimited in the period other than in respect of Pollution Liability where it is in all in any one period.

Policy Wording including: Defective Premises Act 1972
Consumer Protection Act 1987
Indemnity to Principals Clause

Excess: £2,500



Suite 2 Bailey Court, Green Street,
Macclesfield, Cheshire, SK10 1JQ
T: 01625 668 888
F: 01625 668 899

Mitchell Harper House,
37 High St, Colleshill B46 1AY
T: 01675 463 999
F: 01675 464 237

PLANT INSURANCE

Insurers: NMU (Speciality) Limited

Policy No: CPL022140794

Period: 2nd July 2024 to 1st July 2025, both dates inclusive

Hired in Plant: £500,000 – Any One Incident
£500,000 - Any One Item

Excess: £2,500



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Appendix 5

Structural Assessment Report