

SAMPLE checklist

Contractor Management

The following checklist is intended to provide general information to assist clients in managing contractors. This is not an exhaustive checklist of all possible controls.

Where the organisation answers the question with a 'no', further investigation of the risk and possible control measures should be determined and implemented.

1. Organisation Management Practices

	Yes	No	N/A	If No, actions required:	Date:
1.1 Has a contractor management policy been established?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
1.2 Has a contractor management procedure been established?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
1.3 Is a representative nominated to manage organisation and contractor risks?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
1.4 Are all contractor policies and procedures properly communicated to personnel?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
1.5 Are procedures routinely tested for performance and results issued to management?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
1.6 Are personnel regularly updated on changes in contractor policies or procedures?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____

2. Risk Management

	Yes	No	N/A	If No, actions required:	Date:
2.1 Are risks by contractors identified, assessed, ranked and prioritised in order of risk level?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
2.2 Are risk controls tested for performance and adequacy?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
2.3 Is a contractor risk register established to summarise identified risks to the organisation?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
2.4 Are risk assessments issued by the contractor prior to the commencement of work?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
2.5 Are contractor risk controls supported with relevant OHS policies and procedures?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____

3. Contractor Assessment and Verification

	Yes	No	N/A	If No, actions required:	Date:
3.1 Does the contractor have an OHS management system?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
3.2 Are records issued to demonstrate the active operation of their OHS management system?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
3.3 Is a project manager nominated and OHS management plan prepared by the principal contractor where the cost of works meet or exceed your state or territory's OHS regulation requirements?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
3.4 Do contractor OHS management plans detail what systems and procedures will apply during the term of works?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
3.5 Are work licences and permits and insurance certificates of currency presented for adequacy and approval?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
3.6 Is there a system to ensure insurance certificates of currency remain valid during works?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____

4. Induction and Training

	Yes	No	N/A	If No, actions required:	Date:
4.1 Is adequate induction and training provided to contractors and stakeholders who are undertaking works?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
4.2 Does the nominated representative in your organisation induct contractors in your policies, procedures and rules?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
4.3 Are stakeholders updated if a change is made to organisation policies or procedures?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
4.4 Does your contractor provide induction and training to their employees and sub-contractors?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
4.5 Is a copy of the contractor induction register issued to the organisation for verification?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
4.6 Does the register indicate details of each employee's OHS training competency?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____

5. Monitoring

	Yes	No	N/A	If No, actions required:	Date:
5.1 Are random or regular OHS inspections undertaken to monitor compliance and performance?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
5.2 Is supervision undertaken to monitor contractor conformance to OHS practices?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
5.3 Is there a procedure to report hazards or breaches?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
5.4 Are reported OHS breaches highlighted to remind users of their obligations?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
5.5 Are breaches reviewed and corrected to avoid repeat offences?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
5.6 Do the organisation and contractor report back to one another on performance results?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
5.7 Are corrective actions checked and verified for OHS compliance?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
5.8 Is a procedure established for incident notification?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____

6. Completion of Works

	Yes	No	N/A	If No, actions required:	Date:
6.1 Are buildings and surrounding grounds checked and left in a safe condition?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
6.2 Are certificates of warranty, safety and workmanship handed over?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
6.3 Are safe work and operating procedures provided for new equipment?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
6.4 Are new rules, policy and procedures required for new building and equipment?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
6.5 Are contractor project records and reports kept in accordance with your state or territory OHS requirements?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____

7. Other

	Yes	No	N/A	If No, actions required:	Date:
7.1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
7.2	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
7.3	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
7.4	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
7.5	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
7.6	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
7.7	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
7.8	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____

For further information and assistance on contractor management or to obtain a copy of our contractor management fact sheet, please contact the Risk Management Helpdesk on 1300 660 827.

1300 660 827
www.ccinsurances.com.au

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