

# Health & Safety 'Health Check'



This H&S 'health check' is designed to review the arrangements you have in place to manage health and safety at work. We aim to identify areas where you may need assistance and how to comply with your legal requirements.

Your information is kept confidential and only discussed between you and our team. Our impartial and honest feedback is based on the information you provide, so please complete all areas with as much detail as you can, regardless of whether it may reflect an area where you may potentially be below required standards. This process is intended to guide and assist you to compliance, and beyond.

If at any point you would like to talk, our Advisors would be happy to help on 01948 871 373.

## Your Business

Contact Name		Role/Position	
Contact Tel No		Contact Email	
Company Name		Company Address	

Please describe your main business activities.

Please describe your typical Client/Customer.

How do you feel about H&S in your workplace?

- We are happy we have everything in place, but would welcome an independent review
- We have things in place but want guidance in certain areas
- We have not checked our H&S for more than 12-months
- We feel uncertain and need support
- Other: *Please explain below*



# Health & Safety 'Health Check'

## Your People

Do you have a competent person appointed to manage your H&S duties?

Yes. Internal Resource:

Yes. External Resource:

No

I am not sure, I would like to discuss

How many employees do you have currently? Please explain whether they are full-time, temporary or contractors

Full-Time

Part-Time

Temporary

Contractors

Are any employees under the age of 18?

Yes, How Many?

No

How do you communicate safety information to your employees?

Are your Directors/Senior Management Team confident with their H&S Responsibilities?

Yes

No

We would like more guidance

## Your Arrangements

Do you have a written H&S policy with responsibilities and arrangements?

Yes. What date was your written policy last reviewed?

No

Do you have a H&S Law poster displayed, completed with current information?

Yes

No

Does your H&S policy identify responsibilities within your company

Yes

No

Do you have first aid provisions, information and assistance suitable for your business?

Yes

No

We would like to discuss this in more detail

Do you have arrangements in place for recording and reporting work-related incidents, accidents and near misses?

Yes

No

We would like to discuss this in more detail



# Health & Safety 'Health Check'



## Your Workplace

Do you have risk assessments for your workplace and/or the tasks you undertake?

- Yes       No       We would like to discuss this in more detail

Do you have written safety systems or method statements as the result of risk assessments?

- Yes       No       We would like to discuss this in more detail

Are regular H&S inspections or audits carried out?

- Yes       No       We would like to discuss this in more detail

Do you have COSHH Assessments in place for any substances you use, that are classified as hazardous to health?

- Yes       No       We would like to discuss this in more detail  
 We do not consider this as applicable

Do you have a current Fire Risk Assessment for your premises?

- Yes       No       We would like to discuss this in more detail

## Other

Are there any specific questions you have regarding health and safety in your workplace?

Do you have any further questions for the Safety For Employers Team?

Thank you for completing this questionnaire. Please save a copy for your records and email this to [employers@safetyfor.co.uk](mailto:employers@safetyfor.co.uk) and one of our advisors will be in contact within 1-2 working days.

