

**Works Contract**

**PRE-QUALIFICATION QUESTIONNAIRE**

**DOCUMENT REFERENCE: PQQ1b**

**economic operator Health & Safety AND ENVIRONMENTAL MANAGEMENT SYSTEMS Addendum**

**PIERPONT PLAZA BUILDING 1**

**REFERENCE:1939/16**

|  |  |
| --- | --- |
| **Name of Company completing this form:** | **[Insert Company Name Here]** |
| **If part of a Group of Economic Operators insert name of Group of Economic Operators**  **and indicate designation:** | **[Insert Group of Economic Operators/Lead Enterprise Name Here]**  **(If Consortium Name is not known enter the Lead Enterprise Name)** |
| **[**  **]**  **Select Designation - as stated in PQQ1 - [A-02]** |
| **Indicate an Other Entity designation if applicable :** | **[ ]**  **Select Designation - as stated in PQQ1 - [A-06]** |

**Catalyst**

**Queens Road**

**Queens Island**

**Belfast BT3 9DT**

**CONTENTS**

[GUIDANCE FOR Completion of PQQ1B 3](#_Toc17987445)

[section A - economic OPERATOR/Group of Economic Operators information 5](#_Toc17987446)

[section B - NOT USED 5](#_Toc17987447)

[SECTION C HEALTH AND SAFETY AND ENVIRONMENTAL MANAGEMENT SYSTEMS 6](#_Toc17987448)

[SECTION 2.1 BUILDSAFE-NI INITIATIVE 6](#_Toc17987449)

[SECTION 2.2 Health & Safety COMPETENCE 7](#_Toc17987450)

[SECTION 3 ENVIRONMENTAL MANAGEMENT SYSTEMS (EMS) 12](#_Toc17987451)

[SECTION D – NOT USED 13](#_Toc17987452)

[SECTION E - DECLARATIONS 13](#_Toc17987453)

[SECTION F - DOCUMENT RETURN REGISTER 15](#_Toc17987454)

# GUIDANCE FOR Completion of PQQ1B

1. This addendum to **PQQ1 Section C** (and **PQQ1C** if applicable), should be read in conjunction with the accompanying MoI-Part A and MoI-Part B. All defined terms within this document are explained within the glossary of MoI-Part A.
2. Economic Operators must:

* Hold 3rd party certification of their health and safety and environmental management system.
* Satisfy the Buildsafe-NI initiative (Section 2.1 - Question [HS-01]).

And to satisfy Section 2.2 of this document, either:

1. Hold a valid health and safety competence assessment certificate issued by an organisation that is a scheme member of the SSIP Forum. And obtain a ‘Pass’ rating to one question relating to Fatal / Major Injury accidents and Enforcement Notices (Section 2.2 - Questions [HS-02 & HS-03]) contained within this document.

**OR**

1. Obtain a ‘Pass’ rating in 4 evidence based health and safety questions (Section 2.2 -Questions [HS-04] to [HS-07]) contained within this document.

Failure to hold 3rd party health and safety certification in accordance with Section 2.1 and achieve an overall ‘Pass’ rating in one of the options contained within Section 2.2 will result in the Economic Operator being **rejected** from the Procurement.

1. This document is arranged in 3 Sections as described below and all information sought in all parts must be provided and all questions answered.

|  |  |  |
| --- | --- | --- |
| **Section** | **Content** | |
| **A** | **General Information about the Economic Operator** | **Compliance/Minimum Standards** (These sections do not contribute to the scored evaluation) |
| **B** | **Not used** |
| **C** | **Health and Safety and Environmental Management Systems.** |
| **D** | **Not used** |
| **E** | **Declarations** |
| **F** | **Document Return Register** | **Used in support of other Sections** |

1. **Failure by an Economic Operator (member of a Group of Economic Operators and/or other Entities where applicable) to complete all questions fully and in accordance with all requirements therein and to return PQQ1B and all supporting information required by the PPQP Submission Deadline may result in the Economic Operator’s PPQP Submission being rejected as set out in MoI-Part A, Section 9 and 10.**
2. Where the role of an Economic Operator is to be fulfilled by a Group of Economic Operators each member should complete a copy of PQQ1B as if each organisation was a single Economic Operator. In addition where an Economic Operator or Group of Economic Operators is relying on the capacity of Other Entities for professional and technical ability then those Other Entities must each complete a copy of PQQ1B as if each organisation was a single Economic Operator.
3. For Group of Economic Operators and Other Entities the ‘**Member Designation**’ given in response to question [**A-02**] and [**A-06**] of **PQQ1** document shall be maintained throughout the whole PQQP Submission.

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# section A - economic OPERATOR/Group of Economic Operators information

In the case where an Economic Operator is a Group of Economic Operators then the information in this document will represent one member of that Group of Economic Operators. In the case where the Economic Operator or Group of Economic Operators is relying on the capacity of Other Entities for professional and technical ability then the information in this document will represent one Other Entity.

A-01 ECONOMIC OPERATOR’S ADMINISTRATIVE INFORMATION

|  |  |
| --- | --- |
| **Trading name:** | [Enter name here] |
| **Main address:** | [Enter address here] |

# section B - NOT USED

# SECTION C HEALTH AND SAFETY AND ENVIRONMENTAL MANAGEMENT SYSTEMS

SECTION 1 NOT USED

SECTION 2 HEALTH AND SAFETY

For the avoidance of doubt, questions within **Section 2** relate to compliance with the Buildsafe-NI initiative and assessment of the Economic Operator’s health and safety competence and **do not form part of the scored evaluation**.

Economic Operators who fail to meet the minimum health and safety requirements will be rejected (see MoI-Part A Section 9.3).

### SECTION 2.1 BUILDSAFE-NI INITIATIVE

**Economic Operators must complete this Section.**

Before completing question [HS-01] please read MoI-Part A Section 9.3.

[HS-01] Complete the Table below:

|  |  |
| --- | --- |
| I confirm that I **hold** and will maintain 3rd party certification of my documented health and safety management system. | [Select from drop down box] |
| **Copy of Certificate attached at Appendix 1 :** | [Select from drop down box] |
| **Complete where applicable:**  As the 3rd party certification provider of my documented health and safety management system is not listed on the CPD web site <https://www.finance-ni.gov.uk/articles/buildsafe-ni-list-third-party-health-and-safety-certification-scheme-providers>  a completed ‘Assessment of Organisations Providing 3rd Party Health & Safety Management Systems’ questionnaire and associated sample audit report is attached at **Appendix 1B :** | [Select from drop down box] |

PASS/FAIL Indicators

|  |  |
| --- | --- |
|  | **Indicators** |
| **Pass** | The health and safety management system has been assessed **as** meeting the Buildsafe-NI requirements. |
| **Fail** | The health and safety management system has been assessed **as not** meeting the Buildsafe-NI requirements. |

### SECTION 2.2 Health & Safety COMPETENCE

**Economic Operators must complete either Option 1 or Option 2 in this Section.**

Before completing this Section please read MoI-Part A Section 9.3.

**Option 1 – Safety Schemes in Procurement (SSIP) Certificate**

An Economic Operator may complete Option 1 (Questions [HS-02] and [HS-03]) if they hold a valid health and safety competence assessment certificate issued by an organisation that is a scheme member of the SSIP Forum.

**[HS-02] Complete the Table below:**

|  |  |
| --- | --- |
| I confirm that my Company **holds** a valid health and safety competence assessment certificate issued by an organisation that is a scheme member of the SSIP Forum. | [Select from drop down box] |
| **Copy of certificate attached at Appendix 2 :** | [Select from drop down box] |

**[HS-03] Major Injury Accidents /Enforcements**

|  |  |
| --- | --- |
| I confirm that my Company did not have any Fatal /Major Injury Accidents (RIDDOR or equivalent) or been issued with any Health and Safety Enforcement Notices since obtaining its most recent health and safety competence assessment certificate issued by an organisation that is a scheme member of the SSIP Forum | [Select from drop down box] |

If you answered **NO** to the above question provide the following:-

Details of the accident(s) and/or enforcement notice(s) and evidence of the follow-up actions taken as a result of the accident(s) and /or enforcement notice(s).

|  |
| --- |
| **Item (i) attached at Appendix 3** [Select from drop down box] |

PASS/FAIL Indicators

|  |  |
| --- | --- |
|  | **Indicators** |
| **Pass** | The details of the accident(s) and /or enforcement notice(s) and the evidence of the follow-up actions taken as a result of the accident(s) and /or enforcement notice(s) is appropriate. |
| **Fail** | Evidence provided fails to meet the above indicator. |

**Option 2 – Where Option 1 does not apply**

An Economic Operator shall complete Option 2 (Questions [HS-04] to [HS-07] if they do not hold a valid Health and Safety Certificate as issued by an organisation that is a scheme member of the SSIP forum detailed in Options 1 above.

All the requested documentary evidence for each question **must** be provided.

**[HS-04] Competent Health & Safety Advice**

Demonstrate that your Company has access to competent health and safety advice by providing the following:

1. A detailed CV that includes qualifications, construction experience, membership of professional bodies, etc and evidence of Continued Professional Development for your lead Health and Safety Advisor involved in the provision of competent health and safety assistance.

|  |
| --- |
| **Item (i) attached at Appendix 4** [Select from drop down box] |

PASS/FAIL Indicators

|  |  |
| --- | --- |
|  | **Indicators** |
| **Pass** | The Curriculum Vitae shows that the Health and Safety Adviser has as a minimum, either:     * a NEBOSH General Certificate (or similar), 5 years experience in the construction sector and evidence of Continued Professional Development; or * a NEBOSH Construction Certificate (or similar), 3 years experience in the construction sector and evidence of Continued Professional Development. |
| **Fail** | Evidence provided fails to meet the above indicators. |

**[HS-05] Qualifications, Experience, Training and Information**

Demonstrate that your company has a competence development process in place to comply with CDM (NI) 2016, including the legal series L153 Managing health and safety in construction - Construction (Design and Management) Regulations 2015, to ensure that your construction workforce has appropriate qualifications and experience for their assigned tasks by providing the following:

1. A detailed training record /competence development plan, for a named operative used by you on a recent construction works project to satisfy the requirements of Regulation 15(7) of CDM(NI) 2016; and
2. A detailed competence development plan or a detailed training /qualification record for a named supervisor used by you on a recent construction works project to satisfy the requirements of Regulation 15(7) of CDM (NI) 2016.

|  |
| --- |
| **Items (i) and (ii) attached at Appendix 5** [Select from drop down box] |

PASS/FAIL Indicators

|  |  |
| --- | --- |
|  | **Indicators** |
| **Pass** | The training records /competence development plans provided for:   * an operative;   AND   * a site supervisor,   shows that a competence development process is in place to satisfy the requirements of Regulation 15(7) of CDM (NI) 2016 |
| **Fail** | Evidence provided fails to meet the above indicators. |

**[HS-06] Accident and Enforcement Action INVESTIGATION**

Demonstrate that your company has a system in place for the investigation of construction site accidents and enforcement actions by providing the following:

1. A copy of your internal investigation report for your last construction site injury accident / dangerous occurrence that occurred within the **last 3 years**. The report to be supported with evidence that remedial actions have been addressed. (Note: Advise if there were no such accidents /occurrences in the last 3 years); and
2. Evidence of the follow-up actions taken as a result of enforcement actions or visits by a health and safety enforcing Authority such as HSENI for the previous 2 years. (Note: Advise if there were no enforcement actions or visits by a health and safety enforcing Authority in the last 2 years).

|  |
| --- |
| **Items (i) and (ii) attached at Appendix 6** [Select from drop down box] |

PASS/FAIL Indicators

|  |  |
| --- | --- |
|  | **Indicators** |
| **Pass** | The evidence provided in respect of:   * the accident investigation including the remedial actions (where applicable) was appropriate; and * follow up action taken as a result of enforcement actions by a health and safety enforcing Authority (if any) was appropriate. |
| **Fail** | Evidence provided fails to meet the above indicators. |

**[HS-07] Subcontracting including Co-operation and Co-ordination**

Demonstrate that your company has procedures in place for appointing Subcontractors that are competent in health and safety by providing a copy of the following:

1. A completed example illustrating your procedure for the appointment of a competent subcontractor on a recent construction works project e.g. a detailed completed health and safety questionnaire; and
2. A completed performance review that you carried out on a Subcontractor on the completion of his work package that includes an assessment of his health and safety performance.

**NOTE: For the purposes of this question the term subcontractor includes consultants, suppliers and labour agencies.**

|  |
| --- |
| **Items (i) to (ii) attached at Appendix 7** [Select from drop down box] |

PASS/FAIL Indicators

|  |  |
| --- | --- |
|  | **Indicators** |
| **Pass** | The example illustrating your procedure for the appointment of a subcontractor and the health and safety performance review provided:   * Demonstrates that suitable arrangements are in place in respect of health and safety competence. |
| **Fail** | Evidence provided fails to meet the above indicators. |

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### SECTION 3 ENVIRONMENTAL MANAGEMENT SYSTEMS (EMS)

For the avoidance of doubt, question [EMS-01] within **Section 3** relates to compliance with the requirements for Environmental Management Systems and **does not form part of the scored evaluation**.

Economic Operators who fail to meet the requirements for Environmental Management systems will be rejected (see MoI-Part A Section 9.3.1 and 9.3.5).

[EMS-01] Complete the Table below:

|  |  |
| --- | --- |
| I confirm that I **hold** and will maintain 3rd party certification of my documented Environmental Management System (EMS). | [Select from drop down box] |
| **Copy of Certificate attached at Appendix 8 :** | [Select from drop down box] |
| **Complete where applicable:**  As the 3rd party certification provider of my documented Environmental Management System is not listed on the CPD web site at:  <https://www.finance-ni.gov.uk/articles/environmental-management-systems-list-third-party-providers>  a completed “Questionnaire for assessment of organisations providing 3rd Party EMS certification” and associated sample audit report is attached at **Appendix 9:** | [Select from drop down box] |

PASS/FAIL Indicators

|  |  |
| --- | --- |
|  | **Indicators** |
| **Pass** | The Environmental Management System has been assessed **as** meeting the requirements that are set out at:  <https://www.finance-ni.gov.uk/articles/environmental-management-systems-construction-procurement>  https:/ |
| **Fail** | The Environmental Management System has been assessed **as not** meeting the requirements that are set out at:  <https://www.finance-ni.gov.uk/articles/environmental-management-systems-construction-procurement> |

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# SECTION D – NOT USED

# SECTION E - DECLARATIONS

I confirm that I have read and accept the disclaimers set out in MoI-Part A Section 6.

I certify that the information supplied is accurate to the best of my knowledge and completed and submitted with due diligence. I understand and accept that false information could result in exclusion from this procurement competition.

I undertake to notify the Contracting Authority of any changes to the information given in answer to questions in this PQQP that may arise during this procurement process. I also understand that it is a criminal offence, punishable by imprisonment, to give or offer any gift or consideration whatsoever as an inducement or reward to any servant or representative of the Contracting Authority I also understand that any such action will empower the Contracting Authority to cancel any contract currently in force and will result in exclusion from this procurement competition.

I confirm that I have not canvassed or solicited any officer, employee or representative, of the Contracting Authority in connection with this Procurement and that no person employed by me or acting on my/our behalf has done any such act.

I undertake that I will not in the future canvass or solicit any officer, employee or representative, of the Contracting Authority in connection with this pre-qualification process and that no person employed by me or acting on my/our behalf will do any such act.

I undertake that I will not offer or agree to pay or give any sum of money, inducement of valuable consideration directly or indirectly to any person or have done so or cause or have caused to be done in relation to any other response to this pre-qualification process.

I undertake that I will not enter into any agreement or arrangement with any other person that he/she shall refrain from participating in this pre-qualification process.

I undertake that I will not at any time discuss with any other person any aspect of our submission, save for the Subcontractors, members of my Group of Economic Operators and Other Entities being part of my submission, and will procure this same undertaking from those Subcontractors, members of my Group of Economic Operators and Other Entities.

I undertake to assess the requirements of the Safeguarding Vulnerable Groups (Northern Ireland) Order 2007 as they relate to this contract and to ensure that I will not employ a barred individual to work in regulated activity.

I confirm that I have read and understand all the documentation contained within this competition.

I confirm that I have highlighted any perceived shortcomings in this procurement process to the Contracting Authority, and any part of the documentation, or any other aspect of this procurement process, which I considered to be unclear or not compliant with relevant legislation, has been highlighted to the Contracting Authority in a message and clarified.

I confirm that I am aware that any proceedings relating to any perceived non-compliance with relevant law must be started within 30 days beginning with the date when the Economic Operator first knew, or ought to have known that grounds for starting the proceedings had arisen (and that only the Court may extend the time limits up to 3 months, where the Court considers that there is a good reason for doing so).

**Freedom of Information Declaration:**

**Before completing the Freedom of Information Declaration below please read MoI-Part A, Section 9.5.2.**

I consider that the information in this Pre-Qualification Questionnaire is commercially Sensitive [Select from drop down box]

If the information supplied in this questionnaire is considered commercially sensitive, please state which information should not be disclosed and provide reasons.

|  |
| --- |
| **[Enter text here]** |

Period for which information should remain commercially sensitive.

|  |
| --- |
| **[Enter text here]** |

Declaration for and on behalf of **Economic Operator / member of a Group of Economic Operators / Other Entity**

I the under named hereby confirm that I have read and accept to abide by the terms of this PQQP Submission and that I have all requisite corporate authority to authorise this warranty.

|  |  |
| --- | --- |
| **Print Name:** | **[Enter name here]** |
| **Title:** | **[Enter title here]** |
| **Position in Company :** | **[Enter position here]** |

# SECTION F - DOCUMENT RETURN REGISTER

**Section 2.1 – Buildsafe-NI Initiative**

|  |  |  |  |
| --- | --- | --- | --- |
| **Document Return Register** | | | |
| **Appendix**  **No** | **Question Reference** | **Document File Naming Convention** | **Tick** the documents that have been submitted |
| **1** | **[HS-01]** | Economic Operator Name-**PQQ1B-A1-HS-01** |  |
| **1B**  **(where applicable)** | **[HS-01]** | Economic Operator Name-**PQQ1B-A1B-HS-01** |  |

**Section 2 – Health & Safety**

Economic Operators shall ensure that all documents relevant to either Option 1 or Option 2 as required and summarised below, are returned with this PQQ1B - Health & Safety and EMS Addendum:

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Document Return Register** | | | | |
| **Section 2** | **Appendix No** | **Question Reference** | **Document File Naming Convention** | **Tick** the documents that have been submitted |
| **Option1** | **2** | **[HS-02]** | Economic Operator Name-**PQQ1B-A2-HS-02** |  |
|  | **3** | **[HS-03]**  Item (i) | Economic Operator Name-**PQQ1B-A3-HS-03i** |  |
| **Option2** | **4** | **[HS-04]**  Item (i) | Economic Operator Name**-PQQ1B-A4-HS-04i** |  |
|  | **5** | **[HS-05]**  Items (i) and (ii) | Economic Operator Name**-PQQ1B-A5-HS-05i** |  |
|  |  |  | Economic Operator Name**-PQQ1B-A5-HS-05ii** |  |
|  | **6** | **[HS-06]**  Items (i) and (ii) | Economic Operator Name**-PQQ1B-A6-HS-06i** |  |
|  |  |  | Economic Operator Name**-PQQ1B-A6-HS-06ii** |  |
|  | **7** | **[HS-07]**  Items (i) and (ii) | Economic Operator Name**-PQQ1B-A7-HS-07i** |  |
|  |  |  | Economic Operator Name**-PQQ1B-A7-HS-07ii** |  |

**Section 3 – Environmental Management Systems**

Economic Operators shall ensure that all documents relevant to EMS-01 as summarised below, are returned with this PQQ1B - Health & Safety and EMS Addendum:

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Section** | **Appendix No** | **Question Reference** | **Document File Naming Convention** | **Tick** the documents that have been submitted |
| **3** | **8** | **[EMS-01]** | Economic Operator Name**-PQQ1B-A8-HS-08** |  |
| **3** | **9** | **[EMS-01]** | Economic Operator Name**-PQQ1B-A9-EMS-09** |  |

It is the Economic Operator’s responsibility to ensure that the PQQP Submission complete with the requisite supporting information, is fully completed and returned as instructed using the **NAMING convention** outlined in the above table. Where it states “Economic Operator Name” the Economic Operator, member of a Group of Economic Operators or Other Entity shall insert its name. For example, if your company name was “AN Other Ltd” and you are returning **Appendix 3** the document should be saved as; **AN Other Ltd-PQQ1B-A3-HS-03i.**

***Note***: the document file naming convention as set out above should also be labelled within the header of each document respectively.