



**BCATS**

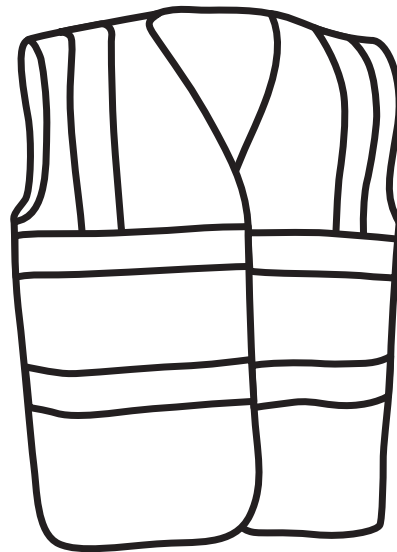
BUILDING, CONSTRUCTION  
AND ALLIED TRADES SKILLS

**Level**

**3**

# Safety practices

Assessment resource



**5 credits**

Skill Standard 40569 (v1)

**Contribute to a healthy and safe BCATS environment**

Learner name: \_\_\_\_\_

BCATS project: \_\_\_\_\_

**BCITO**  
He Hunga Hanga Mātou  
**building people**

## Assessment: Safety practices

### Learner instructions

This assessment is about contributing to a safe workplace while working on a BCATS project.

You need to show you can:

- participate in health and safety induction and other decision-making activities
- put safety controls in place
- work safely
- look after tools, equipment and machinery
- complete health and safety documents.



Your teacher will observe you working throughout your project. They will provide comments in this assessment resource as evidence to support their observations.

You will need to provide the following evidence to support this. Submit it using myBCITO or the process at your school/organisation.



Completed *Progress record* templates, including how you looked after tools/equipment/machinery (in the Level 3: Project diary).



Health and safety induction documents with your sign-off on understanding and acceptance highlighted.

Toolbox meeting notes with your participation highlighted.

Hazard register with your notes about controls you put in place and monitored.

Incident report with any incidents you recorded (if needed).

**Note:** All of the above documents should reflect the processes at your school/organisation.



Photos that clearly show you working safely in the BCATS workplace (if needed).

Use the assessment checklist in this assessment resource to keep track of the evidence you have collected.

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The grade you are awarded will be based on your ability to effectively contribute to a healthy and safe BCATS workplace.

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## Assessment checklist: Safety practices

To be completed by the learner and the teacher.

Assessment activity	Evidence needed	Date all evidence collected (Learner to complete)	Teacher sign-off
Carry out safe practices	Completed <i>Progress record</i> templates, including how you looked after tools/equipment/machinery.		
	Health and safety induction documents with your sign-off on understanding and acceptance highlighted.		
	Toolbox meeting notes with your participation highlighted.		
	Hazard register with your notes about controls you put in place and monitored.		
	Incident report with any incidents you recorded (if needed).		
	Photos that clearly show you working safely in the BCATS workplace (if needed).		
<b>Note:</b> A copy of the project brief must also be included in your overall portfolio of evidence.			

## Teacher observation: Safety practices

Learner name: \_\_\_\_\_

Project: \_\_\_\_\_

### Teacher instructions

Below are criteria for the available grades.

Not Achieved	Achieved	Merit	Excellence
Contribution is not made appropriately to a healthy and safe BCATS environment.	Contribute to a healthy and safe BCATS environment.	Contribute consistently to a healthy and safe BCATS environment.	Contribute proactively to a healthy and safe BCATS environment.



**Provide comments on the learner's ability to meet the following assessment criteria, considering everything you observed throughout the project.**

Health and safety induction and decision-making activities are contributed to.	
Controls are identified and put in place for workplace hazards and monitored for effectiveness.	
New hazards and any incidents are recorded using appropriate workplace documentation.	
Tools, equipment and machinery are cared for, and appropriate records are kept.	

# Grade awarded: Safety practices

## Teacher instructions

After considering all the evidence collected, enter the grade you will award for Skill Standard 40569, with comments that explain your decision.

Final grade		Date	
Justification for final grade (Provide overall comments, considering all evidence collected)			

## Teacher and learner sign-off

		Date
Learner signature (Grade received and accepted)		
Teacher sign-off	Name: _____ Signature: _____	