

COURSE REGISTER

HEALTH & SAFETY LEVEL 1 AWARD QCF LEVEL 4 SCQF	START DATE:	END DATE:	INSTRUCTOR(S):
COURSE REFERENCE:	APPROVED CENTRE:	VENUE:	

Instructor Guidance:

1. Please ensure that Learners' Names are entered clearly in column (1).
2. Please write your Initials in Column (2) to verify each Learner's identity. **NB:** Proof of ID is required for all learners that you do not know i.e. an open course. If the learners are from a single employer, then this is not mandatory.
3. Please initial each completed session of your course in the relevant Session columns (4) to (7) to confirm the attendance of each Learner. A Session can be 2 Hours, ½ Day or Full Day. Do not include natural breaks.

(1) LEARNERS' NAMES (Name to appear on certificate)	(2) Learner ID verified	(3) EMAIL ADDRESS (optional)	(4) Session 1	(5) Session 2	(6) Session 3	(7) Session 4	(8) Pass or Fail
1							
2							
3							
4							
5							
6							
7							
8							
9							
10							
11							
12							
13							
14							
15							
16							

INSTRUCTOR'S SIGNATURE: _____ DATE: ____/____/____

Health and Safety in the Workplace Awards

QCF Level 1 AWARD (England, Northern Ireland and Wales)

Qualification title: **FAA Level 1 Award in Health & Safety in the Workplace (QCF)**

SCQF Level 4 AWARD (Scotland)

Qualification title: **Award in Health & Safety in the Workplace at SCQF Level 4**

INTRODUCTION

Congratulations, you are about to embark on a course in a subject that is important to all of us.

This is an excellent introduction to health and safety in the workplace and will benefit those who are starting work for the first time or for those returning to work after a long absence, so that Health and Safety legislation can be updated.

Successful candidates will be awarded a national Level 1 (Level 4 in Scotland) qualification which will provide an ideal platform to higher level training or career development.

COURSE CONTENT

The course is made up of theoretical sessions delivered by your Instructor who will provide a detailed course programme. A range of subjects is covered including:

- Understand the importance of health, safety and welfare standards in the workplace
- Know how hazards and risks are controlled in the workplace
- Be aware of the main causes and effects of poor health and safety at work
- Understand how health and safety information is communicated in the workplace

More information about the content and learning outcomes is shown on page 3.

FOR YOUR COMFORT AND ASSISTANCE

We wish to make every effort for you to gain as much as you can from the course - including a pass award at the end. If you have any particular needs to enable you to participate fully and enjoy the course, such as seating position to enhance hearing, please inform the Instructor as soon as possible.

COURSE ATTENDANCE REGISTER

Your Instructor will ask you to enter your name on an Attendance Register - please print your name clearly and as you wish to have it printed on your certificate.

ASSESSMENT AND MARKING

Your Instructor will be responsible for determining whether you pass or fail based upon successful completion of a written test at the end of the course.

CERTIFICATION

Certificates are lifelong and do not require renewal. However, FAA recommends that you take any opportunities to refresh your training.

COURSE EVALUATION

At the end of the course you will be asked to complete a course evaluation form. These forms are an important source of quality assurance material for your Instructor, the Approved training Centre and First Aid Awards – so please take the time to give us your valuable feed-back on the course.

COMPLAINTS & APPEALS

If you are unhappy with any aspect of the course you should firstly take up the matter with the Instructor or the Instructor's Approved Training Centre. If these options are not possible, you may refer the matter to the Quality Assurance Manager at First Aid Awards Ltd, Awards House, 10 Central Treviscoe, St Austell, Cornwall, PL26 7QW.

Tel: 08458 333 999 or **Email:** admin@firstaidawards.com. If you feel that your complaint or appeal has not been dealt with satisfactorily, you may refer the matter to the appropriate Regulatory Body i.e. Ofqual or SQA.

Learner Registration Particulars. *Please complete the personal data questions below:*

PART ONE: PERSONAL DETAILS (For certification purposes):

Please enter your name and address in **BLOCK CAPITALS** to ensure certificate accuracy.

First / Given Name	<input type="text"/>	Family / Surname	<input type="text"/>
Date of birth	<input type="text" value="(DD/MM/YYYY)"/>	Email address (optional)	<input type="text"/>

PART TWO: PERSONAL LEARNING RECORD

Your Personal Learning Record 'PLR' records qualifications and learning attainments that you achieve throughout your lifetime.

If you are successful in the course you are about to take and wish add the qualification to your PLR, please provide additional details below. Some of the information you supply will be used by the Skills Funding Agency to fulfil its statutory functions, issue/verify your Unique Learner Number (ULN) and update/check your Personal Learning Record. The Skills Funding Agency may share your ULN and Personal Learning Record with other education related organisations, such as your careers service, school, college, university, Government Departments and public bodies responsible for funding your education (See note below). Further details of how your information is processed and shared can be found on the LRS website: www.learningrecordsservice.org.uk/privacynotice

Postcode:	<input type="text"/>	Gender:	<input type="text" value="Male / Female"/>
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If you have undertaken National Qualification, for example, GCSE, or National Vocational Qualification courses previously you may have been given a personal reference number called Unique Learner Number 'ULN' (England, Wales & Northern Ireland) or Scottish Candidate Number 'SCN' (Scotland). If you know your number and wish to link this qualification on the national register please enter your number here:

ULN/SCN:

Please tick here if you wish to withhold such information and then go to Part Three: ☐

Note: If you do not wish the Skills Funding Agency to share your PLR, you will need to contact the LRS Helpdesk on 0845 602 2589

PART THREE: EQUAL OPPORTUNITIES MONITORING

Special needs:

As part of our Equal Opportunities policy, First Aid Awards and their Approved Centres are committed to ensuring that there is no discrimination in the provision of our services. If there is anything that may affect your learning that you feel we should know about, please indicate below:

Do you have any special dietary requirements?

Do you have any medical condition that we should be aware of ?

Ethnic Origin:

NOTE: IF YOU DO NOT WISH TO PROVIDE THE FOLLOWING INFORMATION – TICK HERE ☐

- | | | | |
|--|--|------------------------------------|--|
| <input type="checkbox"/> Asian British | <input type="checkbox"/> Black African | <input type="checkbox"/> Chinese | <input type="checkbox"/> White British |
| <input type="checkbox"/> Asian other | <input type="checkbox"/> Black British | <input type="checkbox"/> Indian | <input type="checkbox"/> European |
| <input type="checkbox"/> Bangladeshi | <input type="checkbox"/> Black Caribbean | <input type="checkbox"/> Pakistani | <input type="checkbox"/> White other |
| | <input type="checkbox"/> Black other | | <input type="checkbox"/> Other ethnic |

The above information will be recorded by the Approved Training Centre and First Aid Awards and used solely for purposes directly related to your training/education with us and to monitor the effectiveness of our Equal Opportunities policy.

Normal Data Protection rules will apply.

Health and Safety in the Workplace Awards

QCF Level 1 Award (England, Northern Ireland and Wales)

Qualification title:	FAA Level 1 Award in Health & Safety in the Workplace (QCF)	Code:	600/8131/4
Unit 1 title:	Introduction to Health and Safety for people at work	Unit code:	T/601/8007
Credit:	1		

SCQF Level 4 Award (Scotland)

Qualification title:	Award in Health & Safety in the Workplace at SCQF Level 4	Code:	R376 04
Unit 1 title:	Introduction to Health and Safety for people at work	Unit code:	UF15 04
Credit:	1		

LEARNING OUTCOMES THE LEARNER WILL:		ASSESSMENT CRITERIA THE LEARNER CAN:	For Candidate use only Please tick as each topic is covered and understood
1.	Understand the importance of health, safety and welfare standards in the workplace	1.1 State how the duties of employers contribute to a healthy and safe workplace	
		1.2 State how the duties of employees contribute to a healthy and safe workplace	
		1.3 Outline suitable workplace welfare arrangements	
2.	Know how hazards and risks are controlled in the workplace	2.1 Identify how hazards and risks contribute to workplace risk assessments	
		2.2 State the importance of workers following procedures at work	
		2.3 Outline how to use methods for controlling risk in the workplace	
3.	Be aware of the main causes and effects of poor Health and Safety at work	3.1 Outline the main causes of workplace injury	
		3.2 Outline the main causes of workplace ill-health	
		3.3 Outline the reasons why accidents occur	
		3.4 State the effects of accidents at work	
		3.5 Outline the need to report accidents and near misses at work	
4.	Understand how Health and Safety information is communicated in the workplace	4.1 Identify the main safety signs and signals found in the workplace	
		4.2 List sources of Health and Safety information found in the workplace	
		4.3 State the importance of workers notifying Health and Safety concerns to their employer	

FOR INSTRUCTOR USE ONLY : **PLEASE COMPLETE AT THE END OF THE COURSE**

I can confirm that the learner has satisfied all of the criteria for the learning outcomes for the following qualification assessed by demonstration, questioning and successfully completing the question paper.

Course Reference No.
(if known):

Please select the award that is being applied for:

Level 1 Award in Health and Safety in the Workplace (QCF) (England, Wales & Northern Ireland) ☐

Award in Health and Safety in the Workplace at SCQF Level 4 (Scotland) ☐

Instructor's name:

Date:

Signed:

Centre Name:

Centre Number:

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Health and Safety – Test Paper 1

Level 1 QCF Award / Level 4 SCQF (Scotland)

Please enter your name and today's date:

Surname:	First Name:	Date:
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Question Paper 1

Your Instructor will be responsible for determining whether you pass or fail. Assessment is based on successful completion of the attached test at the end of the course. You must achieve a pass mark of 11 or more out of 15.

These notes are intended to help you through the test process.

Guidance on the completion of the test:

- You must answer all questions - any unanswered questions will be marked as an incorrect answer
- You must select the most appropriate answer from the options given.
The options are labelled 'a' to 'd' for each question.
To indicate your selection, circle the appropriate answer e.g.

a ☒ b c d

If you wish to change an answer, cross through the circle and indicate your new answer with a new circle e.g.

a ~~☐ b~~ c ☐ d

- You will have up to 30 minutes to complete this paper. Ensure you read the questions thoroughly before selecting your answer
- Ensure you double-check your answers and check that you have answered all of the questions
- When you have finished, hold the paper in the air to indicate it is ready for collection and marking
- Remain seated until you are told that you may leave the room
- Any form of cheating will instantly disqualify you from taking any further part in the assessment process
- Should you have any difficulty whatsoever in reading or understanding any question, please ask for clarification.

Before you start the test:

- Make sure your name and today's date is clearly printed in the box above
- Make yourself comfortable with an appropriate working space on which to rest your question paper
- Remove any course/reference documents from view
- Have a pen/biro to complete the paper
- If you are likely to experience any difficulty in undertaking this test, for example, with reading, please inform your Instructor
- A total of 11 or more correct answers out of 15 will entitle you to a pass. If you fail to achieve 11 correct answers, it may be necessary for your Instructor/Trainer to question you further on that particular subject area.

GOOD LUCK!

Health and Safety – Test Paper 1

Level 1 QCF Award / Level 4 SCQF (Scotland)

Questions		Possible answers
1	Which is the best method of reducing risk?	a Using workplace procedures
		b Removing hazards completely
		c Training employees in the hazard
		d Avoiding hazards
2	Which of the following are true?	a Working safely includes not injuring someone else
		b Unnecessary risks are created by using inappropriate tools
		c You should remove hazards when you can
		d All of the above
3	Which of the following are essential for a fire to start?	a Fuel, Carbon monoxide, Smoke
		b Source of heat, Smoke and Fuel
		c Oxygen, Sources of Heat, Fuel
		d Carbon monoxide, Sources of Heat, Fuel
4	Which of the following can arise from poor housekeeping?	a Safe systems of work, blocked fire exits, PPE
		b Infection, Workplace procedures, blocked fire exits
		c Slips, trips and falls, PPE, safe systems of work
		d Blocked fire exits, slips, trips and falls, infection
5	Why do we need to work safely?	a For ethical and moral reasons, to minimise the chance of injuring ourselves
		b To increase the chances of our organisation being fined
		c To avoid missing a deadline
		d To remove the need of a First Aider
6	Which of the following are true?	a It is possible to have a completely hazard free environment
		b The majority of workplace procedures have weak links
		c All hazards can be seen and heard
		d All of the above
7	Identify which of the following is not a good practice when working at a computer workstation:	a Using an adjustable chair
		b The bottom of the computer screen should be at eye level
		c Take frequent short breaks to avoid upper limb disorders
		d Have regular eye tests if most of your work is on computer screens
8	Why should you report incidents?	a Suggests you're not at fault
		b Means that your organisation cannot be prosecuted
		c Places the blame on someone else
		d Allows action to be taken to prevent an incident recurring
9	Which of the following is true:	a Your employer must provide you with personal protective equipment for all workplace task
		b Your employer must only provide safety equipment if you request it
		c You must tell your manager if your PPE interferes with your ability to do your job
		d PPE has no limitations

Health and Safety – Test Paper 1

Level 1 QCF Award / Level 4 SCQF (Scotland)

Questions		Possible answers
10	Common causes of accidents include:	a Poor lifting and carrying
		b Slips, trips and falls
		c Being hit by moving objects or vehicles
		d All of the above
11	What is a risk?	a Something with the potential to cause harm
		b An identified hazard
		c The chance of something happening that has the potential to cause harm
		d All of the above
12	When working with electrical equipment which statement applies:	a The main type of harm from electricity is an electric shock
		b It is always safe to treat the victim of an electric shock
		c Electrical fires are always caused by faulty equipment
		d It is always obvious which cables carry high voltage electricity
13	Which of the following welfare facilities must an employer provide:	a An adequate number of toilets, hot and cold running water, soap and hand-drying facilities
		b Breakout areas and smoking shelters
		c Bottled drinking water and changing facilities
		d First aid room, canteen and showers
14	Which of the following explains a mandatory sign?	a For hazards, such as flammable material
		b Prohibiting certain actions, such as smoking
		c Telling people that they must do something, such as wearing hearing protections
		d Giving information about safety features, such as fire exits
15	Which of the following statements is not true?	a Managers who do not enforce safety rules are breaking the law
		b Active monitoring should be carried out by everyone
		c Only serious accidents have to be investigated
		d There are laws which require employers to provide safety training

Health and Safety – Test Paper 1

Level 1 QCF Award / Level 4 SCQF (Scotland)

TEST RESULTS

Learner Signature:

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**Total score for
written test above
out of 15:**

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FOR INSTRUCTOR USE: I confirm that the learner's score is both accurate and correct, and that the learner was questioned, where appropriate, in respect of any incorrect answer, and that the resulting answer was correct and satisfactory.

Instructor signature:

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Instructor name:

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Centre name:

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FAA Course reference number if known::

Health and Safety – Test Paper 1 - Answers

Level 1 QCF Award / Level 4 SCQF (Scotland)

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Health and Safety – Test Paper 1 - Answers

Level 1 QCF Award / Level 4 SCQF (Scotland)

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MULTI-CHOICE TEST - RESULTS SUMMARY



COURSE / QUALIFICATION:		COURSE REF NO.	DATE:		INSTRUCTOR NAME:					APPROVED CENTRE:								
Health and Safety in the Workplace Level 1 (Level 4 Scotland)																		
Instructor: Enter each student's test results below – 'v' or blank = correct answer given and 'X' = incorrect or no answer given																		
Student Name		Question Numbers															Total correct	Pass (P) or Fail (F) 11 or more for pass
		1	2	3	4	5	6	7	8	9	10	11	12	13	14	15		
1																		
2																		
3																		
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16																		

I certify the above results have been checked and verified as correct by me: Instructor signature

COURSE EVALUATION



Please complete this evaluation and return to your instructor at the end of the course

Name of Course: **Health and Safety at Work**

Name of instructor:

Level 1 QCF Award (England, Wales & Northern Ireland) & Level 4 SQCF Award (Scotland)

Please tick the relevant boxes	Poor	Fair	Good	Very Good	Excellent
Course content.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Effectiveness of training.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Support material and handouts.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Pace of course.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Training facilities.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Use the following rating scale and indicate your response by circling the appropriate number
1 = Strongly disagree 2 = Disagree 3 = Neutral 4 = Agree 5 = Strongly agree

THE INSTRUCTOR

- | | | | | | |
|---|---|---|---|---|---|
| 1. Provided clarity and focus concerning the tasks and exercises | 1 | 2 | 3 | 4 | 5 |
| 2. Demonstrated knowledge and expertise in the subject matter | 1 | 2 | 3 | 4 | 5 |
| 3. Adapted and responded to the needs of individuals | 1 | 2 | 3 | 4 | 5 |
| 4. Created the right climate for open, honest and constructive feedback | 1 | 2 | 3 | 4 | 5 |
| 5. Gave useful feedback which helped individuals and the group as a whole | 1 | 2 | 3 | 4 | 5 |
| 6. Provided appropriate guidance when needed | 1 | 2 | 3 | 4 | 5 |

THE PROGRAMME AND VENUE

- | | | | | | |
|---|---|---|---|---|---|
| 1. The objectives of the programme were met within the time available | 1 | 2 | 3 | 4 | 5 |
| 2. The content was appropriate and relevant to individual needs | 1 | 2 | 3 | 4 | 5 |
| 3. The structure enabled the learning objectives to be met | 1 | 2 | 3 | 4 | 5 |
| 4. The accommodation and services were appropriate | 1 | 2 | 3 | 4 | 5 |

How do you think your skills will improve as a result of attending this programme?

What have you learnt as a result of attending this course?

Any other comments?

Did this course meet your original expectations? Yes ☐ No ☐

Would you recommend this course to someone else? Yes ☐ No ☐

Full name (Block Capitals) _____

Signature _____ Date ____/____/____

Instructor's comments _____

Instructor's signature _____