



“Safe and healthy work for temporary jobs”

EUROPEAN CAMPAIGN OF THE SENIOR LABOUR INSPECTORS COMMITTEE (SLIC)

2017-2019

“Safety and Health of Temporary Agency Workers and Cross-border Workers”

Inspection checklist for Temporary Work Agency (TWA)

1. General information

Date of inspection: \_ \_ / \_ \_ / \_ \_ \_ \_ Corporate ID number (1):

TWA name:

Address:

Telephone:		Fax:		E-mail:	
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TWA own staff (2) Total number of employees:

Temporary workers in TWA(3):	Total number:		M		F		FTE during last year:	
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Percentage of foreign workers in TWA: \_\_\_\_\_%

TWA size (4):

1-9		10-49		50-249		≥250	
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Number of user-undertakings (in time of inspection)



Sector/Branch of activity (Indicate the number of user-undertakings):

Construction	<input type="text"/>	HoReCa (5)	<input type="text"/>
Agriculture	<input type="text"/>	Cleaning services	<input type="text"/>
Food manufacturing	<input type="text"/>	Transport/Logistics	<input type="text"/>
Metal industry	<input type="text"/>	Other:	<input type="text"/>
Health care	<input type="text"/>		

Number of occupational accidents of the temporary agency workers during the last 3 years:

Fatal	<input type="text"/>	Non-fatal	<input type="text"/>
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Accident Information not registered:

Where did accidents happen? Please, precise:

User-undertaking	Sector of activity
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>

**Information on the posted temporary agency workers (6):**

Posted temporary agency workers:  Y  N  If yes  Total number   M  F

Member State	Name of user-undertaking	Number of workers	Sector of activity	Dates of start and finish of posting
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Number of occupational accidents of the posted temporary agency workers during the last 3 years:

Fatal	<input type="text"/>	Non-fatal	<input type="text"/>
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Where did accidents happen? Please, precise:

Member State	User-Undertaking	Sector of activity

**2. Occupational safety and health (OSH) of temporary agency workers**

OSH person designated (*safety representatives/OHS professionals among TWA own staff*)? (7):

<input type="checkbox"/> Y	<input type="checkbox"/> N	<input type="checkbox"/> NR
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Have the temporary agency workers received appropriate health surveillance according to the health and safety risks that they may incur at the user undertaking? (8)

<input type="checkbox"/> Y	<input type="checkbox"/> N	<input type="checkbox"/> NR
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OSH training (9):

<input type="checkbox"/> Y	<input type="checkbox"/> N	<input type="checkbox"/> NR
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Provision of PPE (personal protective equipment) (10):

<input type="checkbox"/> Y	<input type="checkbox"/> N	<input type="checkbox"/> NR
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**3. Communication between temporary work agency, user-undertaking and temporary agency workers**

**3.1 Information given by user-undertaking to temporary work agency, before the assignment (11)**

What about?

List of risks (12)	<input type="checkbox"/> Y	<input type="checkbox"/> N
Measures regarding risk assessment (13)	<input type="checkbox"/> Y	<input type="checkbox"/> N
Precise job specifications for temporary agency worker (14)	<input type="checkbox"/> Y	<input type="checkbox"/> N
Other:	<input type="checkbox"/>	<input type="checkbox"/>

**3.2 Information given by temporary work agency to user-undertaking, before the assignment**

What about?

Has the TWA responsible visited workplace of the user-undertaking?

<input type="checkbox"/> Y	<input type="checkbox"/> N
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### 3.3 Information given by temporary work agency to temporary agency worker, before the assignment (15)



What about?

List of risks	Y	N
Measures resulting from risk assessment	Y	N
Precise job specifications for temporary worker	Y	N
Other:		

### 4. Evaluation by inspector

General OSH conditions in TWA (1.unsatisfactory 2.satisfactory 3.good 4.very good)	1	2	3	4
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Choose two or three user-undertakings to inspect? Why?

1.	
2.	
3.	

### 5. Following-up after inspection

	Number of infractions	Infractions (16)
Written recommendation		
Improvement notice		
Notice to suspend works		
Infraction procedure		