Below is a suggested list for the line manager to cover with a new staff member in the team. If you are a staff member starting work, you may want to ask about these topics as you start your induction.

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| First Day |  | Initial and date when done |
| Fire | Action in the event of a fire e.g.* muster area
* location of call points
* system for evacuation
* role of staff
* identity of local fire wardens/controllers
 |  |
| Welfare Facilities | * location of facilities
* toilets
* areas for smoking
 |  |
| First Aid | * names of first aiders
* location of first aid box
 |  |
| Security | * entrances and exits to building
* codes or swipe cards
 |  |
| Other | Emergency contact details |  |

|  |  |  |
| --- | --- | --- |
| First Week |  |  |
| Personal Safety | * System for lone working
* who to call in an emergency
* occupational Road Risk Policy
* mobile phone policy
* other
 |  |
| Safe systems of work related to post  | * Moving and handling of children or inanimate loads
* dealing with chemicals or machines
* working at height
* violence prevention
* other
 |  |
| List of work area checks | * Storage
* electrical cable safety
* trip hazards
* Display Screen Equipment assessment (if applicable)
* Other
 |  |

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| --- | --- | --- |
| First Month |  |  |
| Accident procedures: | * Who to report accidents to
* what accident forms to complete
* system for accidents after hours or away from site
* Information needed for line manager to be able to investigate
 |  |
| Health and Safety policies:  | * Where they can be found?
* job specific policies e.g. occupational road risk, mobile phone policy
 |  |
| Documents for H&S information: | e.g. KELSI/Knet documents |  |
| H&S Legal responsibilities: | * He or she must look after own Health & Safety and the safety of others
* report shortcomings or defects in a prompt timely manor
* co-operate with employer
* attend necessary training
 |  |
| Training required: | Discussion about health and safety training that may be required for job |  |

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| Notes: |

To be completed by the new member of staff:

I agree that I have been given all relevant information covered by the above list

|  |  |
| --- | --- |
| Name (block capitals) |  |
| School/Directorate |  |
| Signed |  |
| Date |  |

To be completed by Line Manager / Appointed Person:

|  |  |
| --- | --- |
| Name (block capitals) |  |
| Signed |  |
| Date |  |