**HEALTH & SAFETY INDUCTION CHECKLIST**

Listed below is a checklist of health & safety matters, some general and some applicable only to certain schools and certain jobs. **These matters should be covered (as applicable) as soon as possible after your start date.** The Line Manager/SSA should initial each section when complete.

**SECTION A: Mandatory for all Staff**

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| **1.** | **HEALTH & SAFETY POLICIES** | Date | Initials |
| a | Completed all relevant Induction online H&S courses |  |  |
| b | Received copy of the University H&S Policy |  |  |
| c | Received copy of the School / Directorate H&S Policy |  |  |
| d | Checked understanding of contents, with resolution of any language / culture issues |  |  |
| e | Names of individuals with safety responsibilities |  |  |
| f | Explanation of employee’s responsibilities with regard to the health & safety policies |  |  |

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| **2.** | **FIRE SAFETY** | Date | Initials |
| a | Action in the event of a fire including fire exits, fire evacuation route and assembly points and any alternative routes  |  |  |
| b | Correct method for calling the Fire Brigade |  |  |
| c | Difference between ‘prepare to leave’ alarm and ‘evacuation’ alarm (if applicable) |  |  |
| d | Location of fire alarm call points and how to activate them  |  |  |
| e | Day and time of weekly fire alarm test |  |  |
| f | Location of fire extinguishers |  |  |
| g | Identification of which fire extinguishers can be used with different equipment and types of fire (as appropriate) |  |  |
| h | Use of fire extinguishers and what to do after use (as appropriate) |  |  |
| i | Explanation of non-use of lifts in fire |  |  |
| j | Identification of any disabilities or difficulties in responding to an emergency evacuation |  |  |

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| **3.** | **HOUSEKEEPING** | Date | Initials |
| a | Reasons for maintaining tidy work areas |  |  |
| b | Reasons for safe practices in office environments |  |  |
| c | Reasons for maintaining clear access including hazards caused by obstructing gangways, using fire extinguishers as door stops, etc |  |  |
| d | Procedures for dealing with common causes of accidents, e.g. trips, slips, etc |  |  |

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| **4.** | **ACCIDENTS & ABNORMAL OCCURRENCES** | Date | Initials |
| a | Accident reporting procedure and its importance |  |  |
| b | Location of Occupational Health |  |  |
| c | Location of the nearest first aid kit and contact details for first aiders  |  |  |
| d | Action in case of injury to self or others |  |  |
| e | Procedure in the event of a dangerous occurrence |  |  |
| f | Explain procedure for reporting and dealing with “near misses”, and any other occurrence which could have resulted in injury or illness |  |  |

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| **5.** | **SMOKING** | Date | Initials |
| a | University Smoking Policy including the ‘5 metre rule’ |  |  |

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| **6.** | **PERSONAL HYGIENE** | Date | Initials |
| a | Reasons for personal hygiene, including risk of cross infection (if applicable) |  |  |
| b | Reporting contact for notifiable diseases including examples of such diseases (if applicable) |  |  |

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| **7.** | **RISK ASSESSMENT** | Date | Initials |
| a | Explanation of results of all relevant risk assessments and where they are kept |  |  |
| b | General requirements for risk assessment in the workplace |  |  |
| c | Specific requirements for assessment of exposure to substances hazardous to health (COSHH regulations) |  |  |
| d | Specific requirements for risk assessment of display screen equipment (DSE Regulations) |  |  |
| e | Explain procedures for assessing manual handling work and identify any training needs |  |  |
| f | Any specific arrangements for handling materials or objects which are dangerous or difficult |  |  |

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| **8.** | **SAFETY ADVISERS, REPRESENTATIVES AND COMMITTEE**  | Date | Initials |
| a | Introduction to School Safety Advisor (SSA) |  |  |
| b | Explanation of SSA’s role |  |  |
| c | Introduction to Trade Union Safety Representative |  |  |
| d | Explanation of Representative’s role (as distinct from SSA’s) |  |  |
| e | Explanation of the function of the Health & Safety Committee |  |  |

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| **9.** | **OCCUPATIONAL HEALTH**  | Date | Initials |
| a | Completion and return of the Pre-employment Health Checklist. |  |  |
| b | Explanation of the need to attend for statutory health surveillance (if applicable) |  |  |

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| **10.** | **HEALTH & SAFETY TRAINING REQUIREMENTS**  | Date | Initials |
| a | Explanation of the provision of Health & Safety Training |  |  |
| b | Any specific mandatory Health & Safety Training (e.g. Lasers, GMOs)  |  |  |

**SECTION B**: This can be modified by the School Safety advisor to take into account local hazards. Complete the sections which are applicable. Insert N/A if not applicable

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| **11.** | **CLOTHING** | Date | Initials |
| a | Issue, care and cleaning arrangements of uniforms and overalls |  |  |
| b | Action in the event of clothing being contaminated |  |  |

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| **12.** | **PERSONAL PROTECTIVE EQUIPMENT (PPE)** | Date | Initials |
| a | Identification of where PPE is needed in the workplace |  |  |
| b | How to wear and take care of PPE |  |  |
| c | Assessment procedures for protective equipment |  |  |
| d | Issuing, storing, maintaining and replacing procedures |  |  |
| e | Use of eye protection and areas where such use is mandatory |  |  |
| f | Arrangements for obtaining eye protection |  |  |
| g | Limitations of PPE |  |  |
| h | Hearing protection |  |  |
| i | Procedures for assessment of loud noise |  |  |

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| **13.** | **USE OF COMPUTERS** | Date | Initials |
| a | Explain concept of a display screen equipment user |  |  |
| b | Arrangements for carrying out a workplace self-assessment and follow-up procedure |  |  |
| c | Explain need for regular breaks from using the computer |  |  |
| d | Explain arrangements for eye tests |  |  |

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| **14.** | **ELECTRICAL EQUIPMENT** | Date | Initials |
| a | Checks required before use |  |  |
| b | Action if faults found |  |  |
| c | Procedure for testing portable electrical equipment |  |  |
| d | Procedures when new equipment is obtained |  |  |

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| **15.** | **CHEMICAL HAZARDS** | Date | Initials |
| a | Safe handling and storage methods for corrosive liquids |  |  |
| b | Safe handling and storage methods for compressed gases, including asphyxiants |  |  |
| c | Safe handling and storage methods for flammable solvents |  |  |

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| **16.** | **SPILLAGES** | Date | Initials |
| a | Action in the event of spillages |  |  |

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| **17.** | **WASTE DISPOSAL** | Date | Initials |
| a | General waste/rubbish disposal systems |  |  |
| b | Hazardous waste/rubbish disposal systems |  |  |
| c | Disposal of waste solvents |  |  |
| d  | Disposal of other chemicals |  |  |

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| **18.** | **LABORATORIES / WORKSHOPS / KITCHENS** | Date | Initials |
| a | Access arrangements for laboratories / workshops / kitchens |  |  |
| b | Training in use of equipment |  |  |
| c | Machine hazards |  |  |
| d  | Correct safe operating procedures |  |  |
| e | Correct guarding |  |  |
| f | Methods and hazards of internal transport |  |  |
| g | Arrangements for equipment left running overnight including any permit systems |  |  |

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| **19.** | **USE OF OTHER EQUIPMENT** | Date | Initials |
| a | Precautions to be taken when using gas cylinders |  |  |
| b | Use of regulators for gas cylinders and restrictions on interchangeability |  |  |
| c | Use of lasers including particular precautions for Class 3b and 4 lasers |  |  |
| d  | Training and use of breathing apparatus |  |  |
| e | Any other equipment (please list below) |  |  |
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| **20.** | **RADIOLOGICAL HAZARDS** | Date | Initials |
| a | Local rules for ionising and non-ionising radiation use |  |  |
| b | Access to advice on radiological hazards ie the Radiological Protection Supervisor and Advisor |  |  |

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| **21.** | **SUPERVISION OF STUDENTS** | Date | Initials |
| a | Supervisor’s responsibilities for supervision of students |  |  |
| b | Responsibilities on field trips |  |  |

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| **22.** | **OTHER HAZARDS** | Date | Initials |
| a | Insert any other matters identified by the SSA as important in your particular department |  |  |
| b | Particular arrangements for equipment regarding statutory examinations, e.g. pressurised vessels, lifting equipment |  |  |
| c | Explanation of site traffic system (as applicable) |  |  |
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To be completed by the new member of staff:

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| 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:

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| I confirm that the above named has received safety induction training as indicated on this checklist |
| Name (block capitals) |
| Signed | Date |

To be completed by the School Safety Advisor:

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| I confirm that I have been introduced to the above member of staff |
| Name (block capitals) |
| Signed | Date |