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| **PROPERTY INDUCTION FORM – PREGNANT WORKER (PW)**  **To be completed by all those who work or volunteer at the property** | | | | | | | | | |
| Group: | | | Type of property: | | | | | | |
| Address: | | | | | | | | | |
| Inductee name (block letters): | | | | | | | | | |
| Assessor name (block letters): | | | | | | | | | |
| Any paid member of staff or volunteer working in the group property must complete this induction. The assessor can be someone in the group with experience of the property and its legal requirements. Volunteer and assessor must go through the areas below in conjunction with the relevant risk assessments, marking the box on the right hand side “Y - Yes” “N - No” or “N/ A”. Refresher training must be completed every three years. | | | | | | | | | |
| **Subject** | | | | | | | Induction | Refresher | Refresher |
| 1 | Disclosure check if appropriate for the role - Y/ N | | | | | |  |  |  |
| 2 | Lone working policy discussed as appropriate to the role – Y/ N | | | | | |  |  |  |
| 3 | Signage; discussed as appropriate to the role: | | | | | | | | |
| Why signage is in the property and what it means – Y/ N | | | | | |  |  |  |
| What posters HSV: 145; HSV: 146 and HSV: 147 mean – Y/ N | | | | | |  |  |  |
| 4 | Dealing with emergencies; discussed as appropriate to the role: | | | | | | | | |
| Determine whether health screening is needed – Y/ N | | | | | |  |  |  |
| How and why to fill in personnel register HSV: 111 – Y/ N | | | | | |  |  |  |
| Completion of accident HSV: 122/ incident HSV: 123 report form - Y/ N | | | | | |  |  |  |
| What to do in an emergency – emergency aid notice HSV: 124 – Y/ N | | | | | |  |  |  |
| What the fire safety plan HSV: 125 or HSV: 225 means – Y/N | | | | | |  |  |  |
| Why fire drills are run every six months – Y/ N | | | | | |  |  |  |
| What the fire evacuation drill record HSV: 126 means – Y/ N | | | | | |  |  |  |
| Is fire awareness training needed? – Y/N | | | | | |  |  |  |
| 5 | Safety checks; discussed as appropriate to the role: | | | | | | | | |
| Completing internal safety checklist HSV: 112 – Y/ N | | | | | |  |  |  |
| 6 | Equipment: volunteer competent to use equipment as appropriate: | | | | | | | | |
| Workplace risks explained – Y/ N | | | | | |  |  |  |
| Agree a list of tasks that can be performed – Y/ N | | | | | |  |  |  |
| Agree regular rest periods if appropriate – Y/ N | | | | | |  |  |  |
| Individuals trained on agreed equipment excluding stepladders – Y/ N | | | | | |  |  |  |
| Details of hazardous materials in the property – Y/ N | | | | | |  |  |  |
| How they can be used and stored safely – Y/ N | | | | | |  |  |  |
| Restrict manual handling tasks to light duties – Y/ N | | | | | |  |  |  |
| Is manual handling risk assessment HSV: 141 needed – Y/ N | | | | | |  |  |  |
| 7 | Location of lavatories and washing facilities made clear – Y/ N | | | | | |  |  |  |
| 8 | Use of kitchen and food hygiene rules made clear – Y/ N | | | | | |  |  |  |
|  | **Initial induction** | | | | | | | | |
| 9 | Specific areas of experience (list below): | | | | | | | | |
| Date induction complete: | | | | |  | | | |
| Name of inductee: |  | | Signature: |  | | | | |
| Name of assessor: |  | | Signature: |  | | | | |
|  | **Refresher training** | | | | | | | | |
| 10 | The inductee and assessor must go through the areas on page 1 and mark the box on the right hand side Yes, No or N/ A as appropriate to their role. | | | | | | | | |
| Specific areas of experience (list below): | | | | | | | | |
| Date refresher induction complete: | | | | |  | | | |
| Name of inductee: |  | | Signature: |  | | | | |
| Name of assessor: |  | | Signature: |  | | | | |
|  | **Refresher training** | | | | | | | | |
| 11 | The inductee and assessor must go through the areas on page 1 and mark the box on the right hand side Yes, No or N/ A as appropriate to their role. | | | | | | | | |
| Specific areas of experience (list below): | | | | | | | | |
| Date refresher induction complete: | | | | |  | | | |
| Name of inductee: |  | | Signature: |  | | | | |
| Name of assessor: |  | | Signature: |  | | | | |
| We process this information on the lawful basis of our legal obligation set out by the Health and Safety Executive and Central Government. We will share with other regulatory bodies or insurers if appropriate for reporting or claims processing. To find out how we use and manage your personal data, our full privacy notice is at [www.mssociety.org.uk/privacy](http://www.mssociety.org.uk/privacy). You can also call our Supporter Care team on 0300 500 8084 to get a copy. | | | | | | | | | |