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| **PROPERTY INDUCTION FORM – Contractors**  **To be completed by all those who work or volunteer at the property** | | | | | | | | | |
| Group/ office: | | | Type of property: | | | | | | |
| Address: | | | | | | | | | |
| Inductee name (block letters): | | | | | | | | | |
| Assessor name (block letters): | | | | | | | | | |
| Any contractor carrying out work in the group property of MS Society office 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, marking the box on the right hand side “Y - Yes” “N - No” or “N/ A”. Refresher training should be completed if appropriate. | | | | | | | | | |
| **Subject** | | | | | | | Induction | Refresher | Refresher |
| 1 | Disclosure check if appropriate for the role - Y/ N | | | | | |  |  |  |
| 2 | Contractor confirms they work to their own lone working policy – Y/ N | | | | | |  |  |  |
| 3 | Signage; discussed as appropriate to the role: | | | | | | | | |
| Why signage is in the property and what it means – Y/ N | | | | | |  |  |  |
| 4 | Dealing with emergencies; discussed as appropriate to the role: | | | | | | | | |
| How and why to fill in personnel register HSV: 111 – Y/ N | | | | | |  |  |  |
| Who to report accidents or incidents to - 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 | | | | | |  |  |  |
| Agree level of supervision needed depending on where the contractor is working – Y/ N | | | | | |  |  |  |
| 5 | MS Society safety checks - N/ A | | | | | | | | |
| 6 | Equipment: volunteer competent to use equipment as appropriate: | | | | | | | | |
| Contractor has public liability insurance in place – Y/ N | | | | | |  |  |  |
| Contractor confirms they are competent (sufficient training, knowledge and experience) to carry out the work – Y/ N | | | | | |  |  |  |
| Contactor confirms they are competent to use all relevant machinery and equipment – Y/ N | | | | | |  |  |  |
| Contractor has risk assessment in place for each task along with any supporting method statements or safe systems of work – Y/ N | | | | | |  |  |  |
| Contractor made aware of any hazardous areas they may need to work in or harmful substances they may come into contact with – Y/ N | | | | | |  |  |  |
| Contractor confirms they have read the asbestos register where present – if not present will carry out work assuming asbestos is present – Y/ N | | | | | |  |  |  |
| Contractor confirms they will be responsible for all housekeeping and will remove all waste from site on completion – 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. | | | | | | | | | |