**SITE HS&E INDUCTION RECORD**

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| **Operating business** |  | **Site Name** |  |
| **Operative Name** |  | **Employer** |  |
| **DOB** |  | **Trade/ role** |  |
| **Contact Number** |  | **Site Manager** |  |

This induction record must be completed for any new site operatives working on site by site management.

Once completed this form must be kept securely in the site office for the duration of the project.

It is the responsibility of the Site Manager to ensure that the operative has the required qualifications and competencies for their role and that this site HS&E induction is completed before the person commences working on site.

Refer to HSMS standards – Training

**Qualifications and competencies**

**CSCS Card (or equivalent such as CPCS/ CISRS etc.)**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Card Type** | **CITB No** | **Expiry Date** | **Competency Details (Back of Card)** | **Copied ✓**  |
|  |  |  |  |  |
|  |  |  |  |  |

**Evidence of qualifications and training: (First Aid at Work, Fire Marshal, Banksman etc.)**

|  |  |  |
| --- | --- | --- |
| **Date** | **Course** | **Copied ✓** |
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NOTE: If the operative is required to wear a FFP3 mask, then a copy of their Face Fit Test Certificate must be provided.

**Driving licence details (required for all mobile plant operators)**

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| When operatives are required to operate “ride on” mobile plant, they must possess a CPCS card (or equivalent) and a **full UK or EU** driving licence. Copies should be obtained.  |
| **Name on Licence** | **Licence Number** | **Expiry date** | **Copied ✓** |
|  |  |  |  |

**Emergency contact details**

|  |  |
| --- | --- |
| **Name** |  |
| **Contact number**  |  |
| **Relationship**  |  |

The operative should advise site management if any changes to their emergency contact details.

**Medical conditions**

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| In the event of an emergency, the employee should list any known condition which may affect their ability to safely leave their work area. Also any medical conditions that any First Aiders should be aware of should they become unwell at work. |
| **Condition** | **Treatment or control requirements** |
|  |  |

**Setting out DVD –** During my induction the following the following points were discussed, Operative to Tick (✓) to confirm:

|  |  |
| --- | --- |
| **The setting out DVD is to be shown to provide generic health, safety and welfare information**  | **✓** |
| **1** | I confirm that I have been shown the “setting out” DVD as part of the site induction process. |  |
| **2** | I confirm that I have been shown the “setting out” DVD during a previous induction on another Persimmon site |  |
| Previous site details: |  |

**Site Specific Induction**

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| **The operative is to tick off each section once discussed:** | **✓** |
| **1** | The site manager has explained the location of the Persimmon HS&E Policy, manuals and guidance booklets.  |  |
| **2** | I have been shown the sign in/ out site procedure & the location of the site rules on the notice board. |  |
| **3** | I have been informed of any site wide hazards and the importance of maintaining public protection/ site security. |  |
| **4** | I have been informed of the site traffic management arrangements and shown the traffic management plan. |  |
| **5** | I have been informed of the protective clothing/ equipment to be worn on site. |  |
| **6** | I have been informed of the welfare amenities on site and the location of canteen, drying room and toilets. |  |
| **7** | I have been informed of the emergency procedures, fire alarm & equipment location and evacuation assembly point. |  |
| **8** | I have been informed of the First Aid provisions on site, the location of the defibrillator, the first aiders details and the accident reporting procedures. |  |
| **9** | I have been made aware of the permit to work systems, including hot works, excavations and confined spaces. |  |
| **10** | I have been made aware of the smoking arrangements and where smoking can be carried out on site.  |  |
| **11** | I have been made aware of the Site Operatives Comments Sheet, used to raise health & safety matters to site management. |  |
| **12** | I have been made aware of the waste segregation arrangements on site  |  |
| **13** | **CONTRACTORS:**I am aware of, and understand the method statements and risk assessments associated with my work activities on this site. |  |
| **14** | **SELF EMPLOYED/LABOUR ONLY:**I have received and read/understood the content of the generic risk assessments detailed in my trade pack. |  |
| **15** | I understand that there is no horseplay permitted and will co-operate with supervisors at all times. |  |
| **16** | I understand that I must refer any enquiry relating to the site from a member of the public, to the Site Manager. |  |
| **17** | I understand that I must report all incidents, and near miss occurrences directly to the site manager. |  |
| **18** | The site manager has explained the site specific arrangements.  |  |
| **19** | I understand that all waste must be removed and my work area left in a tidy condition during and when I complete tasks. |  |
| **20** | I understand that if I am operating mobile plant I must have a “Passport to Safety”  |  |
|  | **(Additional points, please add)** |  |

I confirm that I have received the HS&E site induction delivered by the Site Manager

|  |  |  |
| --- | --- | --- |
| Operative signature  |  | Date: |

I confirm that I have delivered the HS&E site induction to the Site Operative.

|  |  |  |
| --- | --- | --- |
| Site Manager signature |  | Date: |