

EVENTS SAFETY MANAGEMENT : INDUCTION CHECKLIST **APPENDIX D**

EVENT _____ Date : / /

- University delegate (e.g. Event Co-ordinator) has :**
- Explained procedures for access to the venue/area
 - Explained security provisions
 - Requirement to wear identification badges (if applicable) or other local arrangements (e.g. swipe card, access).
 - Introduction/Identification of key personnel/staff
 - Procedure for returning badges (if applicable)
 - Explained Risk Management requirements, roles and responsibilities as per the Safety Management Plan/Risk Assessment
 - Explained Incident/Injury/Near miss reporting procedure
 - Explained Emergency and Evacuation procedures
 - Emergency contact numbers
 - Roles and responsibilities of Security, and the Chief Warden, Warden structure where applicable
 - Arrangements for person(s) with a disability if applicable
 - Explained requirements for the tagging of electrical equipment (e.g. portable electric appliances) if bringing equipment on site.
 - Explained requirements for the supervision of children under 18 years (if applicable)
 - Explained requirements for vehicles on site (if not addressed in the Safety Management Plan/Risk Assessment)
 - Provided a tour of the site/area which includes :
 - Location of facilities and amenities
 - Location of first aid and emergency equipment (including Manual Call Points, extinguishers, access and egress points etc)
 - Location of external Assembly Area
 - Areas where there are specific warning signs and instructions
 - Restricted areas (unless authorised by the Event Co-ordinator)
 - Checked all licenses/permits are on file and/or security has been arranged where applicable to the event.
 - Explained requirements for media management (if applicable).
 - Checked that phone contact details are current and hirer/key personnel can be contacted if required during the event.

UNIVERSITY DELEGATE (i.e. person conducting the induction)	CONTRACTOR/VOLUNTEER/ATTENDEE I acknowledge that I have received information as outlined above and understand my responsibilities as explained		
	Print Name	Signature	Name of Employer or position/role
_____ Name (Please print)			
_____ Signature			