

ASHFORD HILL with HEADLEY PARISH COUNCIL

APPENDIX C

INDUCTION BRIEF AND VOLUNTEER ACKNOWLEDGEMENT

Supervisor's name:

Task name:

Date:

Start Time:

Finish Time:

Location: (To be defined by the Supervisor)

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Description of Activity: (To be summarised by the Supervisor)

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Tools to be Used: (To be listed by the Supervisor, taking note of the risks associated with using these tools (for instance cuts and grazes))

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Hazards and Safety Measures:

- All work undertaken by volunteers shall have regard to the Health & Safety at Work etc. Act 1974 and related health & safety legislation.
- You should not undertake the work defined if you have either an injury or illness that could increase risk of further injury or illness either to you or fellow volunteers. If you are unsure of the likelihood of increased risk due to either injury or illness, you should contact the supervisor before starting work.
- You will not be asked to work at height.
- Jewellery, necklaces, watches and ideally should not be worn – wearing them present risk of injury.
- Appropriate footwear must be worn. Ideally, sturdy boots covering the ankle and providing support on uneven ground should be worn. Open-toed shoes or sandals, trainers (footwear without a heel) must not be worn. Doing so increases risk significantly.
- Long hair must be tied up to avoid it getting caught in the activity.
- Gloves should be worn where appropriate.

First Aid:

- When a volunteer is wounded (serious cuts and grazes) undertaking authorised work, the supervisor should be notified as soon as possible. A first aid kit is held by the supervisor.
- In the case of serious injury, immediate first aid should be administered, and the supervisor informed.
- The supervisor is expected to carry with them a mobile telephone. Where necessary, the emergency services will be called.

VOLUNTEER ACKNOWLEDGEMENT

- I understand the scope of work described by the supervisor and agree to abide by the direction relating to this work that they give.
- I agree to comply with all health and safety direction and training I am given in support of this work.
- I agree that I am fit and healthy to undertake this work.
- I agree to make the supervisor aware of any changes to my contact details or health.

Name (Printed)	Contact Details Unchanged (Tick to confirm)	Signature

POST ACTIVITY COMMENTS