**SAFETY ORIENTATION AND TRAINING RECORD**

Employee Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Hire Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Safe work agreement. I understand that (Name of Organization) is committed to providing a safe and healthful work environment. I acknowledge my personal responsibility to follow all safety rules, practice job safety, and report unsafe practices/conditions to my supervisor. I also understand that I am responsible for properly using safety equipment and personal protective equipment provided by the (Name of Organization).

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Signature/Date Supervisor Signature/Date

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| **Newcomer Orientation Topics** | **Employee Initials** | **Trainer Initials** | **Date** |
| Commander’s Safety Policy |  |  |  |
| Nonsmoking Policy |  |  |  |
| Safety Program introductions and overview (Safety Manager, Industrial Hygienist, Safety Committee, Occupational Health Nurse, Risk Manager, Patient Safety Manager, etc.) |  |  |  |
| Employee rights and responsibilities: |  | | |
| * Hazard, near miss, and incident/accident reporting procedures |  |  |  |
| * Emergency procedures (fire, spills, violence in the workplace) |  |  |  |
| * First aid and CPR |  |  |  |
| * Sanitation and housekeeping standards (food and drink, hand hygiene, furnishings and equipment) |  |  |  |
| * Personal protective equipment |  |  |  |
| Current infection control risk assessments and interim life safety measures resulting from construction or life safety code issues |  |  |  |
| Current Safety Program Performance Objectives |  |  |  |

| **Work-site Orientation Safety Topics** | **Employee Initials** | **Trainer Initials** | **Date** |
| --- | --- | --- | --- |
| Department safety policies and rules |  |  |  |
| Accident/injury/unsafe condition/unsafe act reporting procedures |  |  |  |
| Internal and external disaster and evacuation plans |  |  |  |
| Fire prevention, response, and evacuation procedures |  |  |  |
| Safety equipment (emergency eyewash devices, ventilation systems, medical gas emergency shut-off) |  |  |  |
| Personal protective equipment |  |  |  |
| Latex allergy |  |  |  |
| Electrical safety awareness |  |  |  |
| Ergonomic principles |  |  |  |
| Hazard communication, chemical inventories, MSDSs |  |  |  |
| Bloodborne pathogens |  |  |  |
| Compressed gases |  |  |  |
| Slip, trip, and fall prevention |  |  |  |
| Electromagnetic interference awareness |  |  |  |

**Example for Healthcare Workers**

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| **Department-Specific Safety Procedures** | **Employee Initials** | **Trainer Initials** | **Date** |
| Radiation safety |  |  |  |
| Laser safety |  |  |  |
| Chemical hygiene |  |  |  |
| Pharmacy safety |  |  |  |
| Nurse call system operation |  |  |  |
| Wheelchair safety |  |  |  |
| Patient lifting and transfer techniques, proper body mechanics |  |  |  |
| Fire extinguisher training |  |  |  |
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**Example for Maintenance Workers**

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| **Department-Specific Safety Procedures** | **Employee Initials** | **Trainer Initials** | **Date** |
| Lockout/tag out procedures |  |  |  |
| Confined space |  |  |  |
| Ladder use and storage |  |  |  |
| Hand tool safety |  |  |  |
| Portable power tool safety |  |  |  |
| Machine guarding |  |  |  |
| Fall protection |  |  |  |
| Fork lift safety |  |  |  |
| Material handling and storage |  |  |  |
| Welding, cutting, brazing |  |  |  |
| Electrical safety |  |  |  |
| Noise/hearing conservation |  |  |  |
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