

INDUCTION CHECK-LIST

CHILDMINDER ASSISTANT

Assistant Name: _____

Start Date: _____

| Item Discussed | Comments / Further Action Required | Date | Assistant Initials | Childminder Initials |
|--|------------------------------------|------|--------------------|----------------------|
| Welcome and introduction, tour of setting. | | | | |
| Paper work- hours of work/shifts/pay/bank details/sickness report procedure. | | | | |
| DBS Enhanced check completed. EY2 completed. Identification checked. | | | | |
| Emergency contact details. | | | | |
| Duties and Responsibilities – Further Explanation of Job Description/dress code. | | | | |
| Emergency Evacuation Procedure & Emergency Exits. | | | | |
| Accident & Incident Procedure / Use, Storage & Administration of Medication – Record Keeping | | | | |
| POLICIES & PROCEDURES to READ. | | | | |
| SEND policy | | | | |
| Safeguarding / Child Protection Policy | | | | |
| Behaviour Management Policy. | | | | |
| Uncollected child Policy | | | | |
| Raising Concerns / Whistleblowing Policy (see Confidentiality Agreement and Safeguarding Policy) | | | | |
| General Behaviour – Drink, Drugs & No Smoking Policy | | | | |
| Use of Mobile Phones & Cameras | | | | |
| Equality Opportunities Policy | | | | |

| Item Discussed | Comments / Further Action Required | Date | Assistant Initials | Childminder Initials |
|--|------------------------------------|------|--------------------|----------------------|
| Confidentiality Policy & Statement Signed | | | | |
| Health & Safety Policy. Risk Assessments & Hazard Awareness | | | | |
| Complaints Policy | | | | |
| PERSONAL DEVELOPMENT AND TRAINING OPPORTUNITIES | | | | |
| Attending courses/ training available. | | | | |
| 1:1 supervision | | | | |
| Appraisals/Team meetings | | | | |
| LEARNING & DEVELOPMENT of CHILDREN | | | | |
| Observation of children, assessment and planning. | | | | |
| Interacting with others – Sharing Information and working with parents | | | | |
| Play & Interaction with Children | | | | |
| Supporting Children's Progress & Development | | | | |
| Learning records | | | | |
| EYFS Statutory Framework requirements | | | | |
| Activity Planning | | | | |

I hereby confirm that the above items have been discussed during the induction process.

The first staff appraisal meeting is due on _____

Childminder Assistant: _____ Date: _____

Registered Childminder: _____ **Date:** _____