

**LAWSON COMPLIANCE WAIVER**

**Registration for Western paid employees, graduate students, undergraduate students or work study students at Lawson LHSC campuses.**

**All individuals involved in research at Lawson who are not hospital-paid employees must be registered with Lawson (LHSC). We have established a registration process to ensure that Lawson is aware that these individuals are on site and that they have completed all of the required training. Our goal is to provide everyone with the knowledge to make them aware of how to work safely in research.**

**Return the complete document to** **lawsonhealthandsafety@lawsonresearch.com**

***Personnel Information***

 **Name**: Click here to enter text.

 **Cell**: Click here to enter text.

**Email**: Click here to enter text.

**Position**: Click here to enter text.

 **Emergency** **Contact** **Name**: Click here to enter text.

 **Emergency** **Contact** **Number**: Click here to enter text.

 **Supervisor** **Name**: Click here to enter text.

 **Badge** **ID# (if** **applicable**): Click here to enter text.

Section A:**Complete training under the Hospital Mandated Training section:**

\*Please (a) send us any Western certificates for training you completed instead of redoing them, and (b) ignore any inaccessible quizzes but still complete the training modules\*

[ ]  AODA - Excelling at Accessible Customer Service

[ ]  AODA - Integrated Accessibility Standards and Human Rights

[ ]  Chain of Transmission

[ ]  Critical Injuries

[ ]  Cytotoxic Safety

[ ]  [Donning and Doffing of Surgical Masks](https://www.youtube.com/watch?v=XqcouGltYxc&feature=youtu.be) (watch the video)

[ ]  Emergency Codes

[ ]  Fall Prevention

[ ]  Fire Response and Evacuation

[ ]  Hand Hygiene

[ ]  Influenza

[ ]  Musculoskeletal Disorders

[ ]  Ontario’s Occupational Health and Safety Act

[ ]  Routine Practices

[ ]  Safe Handling of Hazardous Drugs

[ ]  Sharps Awareness

[ ]  Workplace Violence Prevention

[ ]  Workplace Hazardous Materials Information System (WHMIS)

Section B:**Read, understand, and agree to the following under the Documents section*:***

[ ]  The Harrassment & Discrimination Policy

[ ]  The PPE requirements

[ ]  The Young Workers Fact Sheet (if 25 years of age or under)

[ ]  The Young Workers Safety Tips (if 25 years of age or under)

[ ]  Guidelines for Safe Social Networking, Blogging & Online Activity

[ ]  Radiation Awareness

Section C:**Complete training below via OWL if you are employed by Western:**

[ ]  Supervisor or Worker Health and Safety Awareness

[ ]  [WHMIS \*New\*](https://owl.uwo.ca/portal/site/583b7373-cc43-4204-91ac-b60b2229e012) (OWL- renewable every 3 years)

[ ]  Safe Campus Community-Preventing Harassment, Violence, and Domestic Violence at Western (OWL –one time only)

[ ]  Accessibility in Service or in Teaching (OWL – one time only)

Section D:**Complete the additional training below if required by your supervisor/ if training pertains to your role:**

1. Radiation Safety Nuclear (renewable every 3 yrs – 6hrs, in class through Western)
2. X-ray Safety – (2hrs, Online)
3. Laser Safety – Mandatory for all class 3b or class 4 laser users (2hrs, online – renewable every 3yrs)
4. [Laser Safety Awareness](https://www.uwo.ca/hr/safety/topics/laser/awareness1.html) (Online for anyone using confocal microscopes or any other equipment with lasers inside the equipment unit)
5. Transportation of Dangerous Goods (renewable every 2yrs)
6. Animal training
7. Clinical SOPs
8. Any additional training specific to the laboratory as required by the immediate supervisor
9. Compressed Gas

Section E:**Send the following items to****lawsonhealthandsafety@lawsonresearch.com****:**

[ ]  Western Certificates (if any)

Section F:**Declaration:**

My submission of this compliance waiver indicates that I have:

[ ] Completed the training requirements indicated in **Section A**

[ ] Read, understood, and agree to the documents in **Section B**

[ ] Completed additional training in **Section C**

[ ] Completed additional training in **Section D**

[ ] Submitted the items in **Section E**

**Enter your name:** Click here to enter text. **Enter today’s date:** Click here to enter a date.