



# COVIDSafe INDUCTION & TRAINING CHECKLIST

COVID-19 SAFE RETURN TO  
CHILD & YOUTH ACTIVITIES  
FRAMEWORK

The **health and safety** of all persons attending our sites during this time is paramount. To ensure all workers are aware of the processes introduced to mitigate the risks associated with COVID-19 the following induction checklist will need to be completed prior to reopening.

<b>Name of Parish:</b>	
<b>Name of Worker:</b>	
<b>Role of Worker:</b>	
<b>Date:</b>	

## INDUCTION DETAILS

#	Item		Comments	Initials
1.	<p><b>Social Distancing</b> - the worker understands the need to social distance (remain at least 1.5 metres away from others) and is aware of the maximum capacity allowed in the building.</p> <p>The worker is aware of the process in place for the drop off and pick up of participants.</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No		
2.	<p><b>Personal Wellbeing –</b></p> <ul style="list-style-type: none"> <li>- The worker has confirmed that they are not in a high-risk category that would make it unsafe for the worker to return? Any workers who fall within this category and wish to return will need to complete the <b>Health and Medical Declaration Form</b></li> </ul> <p><b>Note:</b> The Australian Government has advised people 70 years of age and older, those 65 years and older with chronic medical conditions, people with weakened immune systems and Aboriginal and Torres Strait Islander people 50 years and older with a chronic medical condition to remain at home.</p> <ul style="list-style-type: none"> <li>- The worker understands that at the commencement of the working day they are required to assess their own health and no worker is to attend the site if they are unwell or if they have had contact with a positive case of COVID-19.</li> <li>- Provide workers with further information on when to get tested. NSW health currently advises anybody displaying COVID-19 symptoms to be tested.</li> </ul>	<input type="checkbox"/> Yes <input type="checkbox"/> No		



3.	<p><b>Hygiene</b> – the worker is aware that hand sanitizer needs to be used by all participants (including the worker) as they arrive and leave the site and also throughout the duration of the activity.</p> <p><b>Note:</b> Alcohol based hand sanitizer is dangerous if ingested, particularly by children. When setting up for a Child and Youth activity, the hand sanitizer should be placed out of reach of children and any use by young children should be under the direct supervision of an adult.</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No		
4.	<p><b>Activities</b> – the worker has been made aware of the activities that are permitted and the safe use of equipment.</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No		
5.	<p><b>Food and Drinks</b> – ensure that workers are aware that no food or refreshments are to be prepared or served on site. Participants can bring their own food and drink for personal consumption only.</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No		
6.	<p><b>Cleaning</b> – The worker has been provided with the outline of the cleaning that needs to be undertaken and a copy of the <b>Cleaning Fact Sheet</b> has been provided.</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No		
7.	<p><b>Incident Response</b> – the worker understands that if they become aware that they have been in contact with a confirmed or suspected case of COVID-19 or if they have COVID-19 they must not attend site and notify the supervisor immediately.</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No		

## DECLARATION AND UNDERTAKING

I have been inducted in the areas noted above and I have read and understood the documents provided to me. I am committed to ensuring that health and safety is incorporated into my work and/ or volunteering activities.

In addition to my general WHS responsibilities that have already been provided, I agree to comply with the COVIDSafe obligations set out in this document and I agree to notify my supervisor of any concerns or issues that arise with complying with these requirements.

**Worker Name**

**Worker Signature**

**Worker Contact Details**

I have inducted the worker whose name appears above in the areas listed within this induction to the best of my ability.

**Supervisor Name**

**Supervisor Signature**

**Supervisor Contact Details**