

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 recommencing their role onsite.

Name of Parish:	
Name of Worker:	
Role of Worker:	
Date:	

INDUCTION DETAILS

#	Item		Comments	Initials
1.	<p>Social Distancing - 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 and of each space.</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No		
2.	<p>Personal Wellbeing –</p> <ul style="list-style-type: none"> - The worker understands the high-risk categories for vulnerability in relation to COVID-19 and has been encouraged to raise any concerns regarding their own health with their supervisor. Any concerns that are raised should be managed with the assistance of the worker's GP to confirm whether they are able to return to work or need to continue with work from home arrangements. <p>Note: 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"> - 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. - Ensure that all workers are aware of their leave entitlements and what process they need to follow if they become unwell or are required to self-isolate. 	<input type="checkbox"/> Yes <input type="checkbox"/> No		

	<ul style="list-style-type: none"> - NSW health currently advises anybody displaying any COVID-19 symptoms to be tested. - Make sure workers are aware of the COVIDSafe App. 			
3.	<p>Hygiene – the worker is made aware of the location of hand sanitizer and they are aware that this needs to be used as they arrive and leave the site and throughout the duration of the work day.</p> <p>The worker is encouraged to take breaks outside of the office at regular intervals and must take a break every two hours from an office working environment.</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No		
4.	<p>Use of communal areas - Instructions relating the following has been communicated to the worker?</p> <ul style="list-style-type: none"> - Number of persons allowed in kitchen or staff room - No communal items to be used such as cutlery, cups and plates. - Workspaces, and equipment such as computers, pens and notebooks are not to be shared. Individual items must be provided, or the items adequately cleaned prior to use. 	<input type="checkbox"/> Yes <input type="checkbox"/> No		
5.	<p>Cleaning – where required the worker has been provided with the outline of any cleaning that needs to be undertaken and a copy of the Cleaning Fact Sheet has been provided.</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No		
6.	<p>Incident Response – 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		
7.	<p>The worker has been provided with details of any further COVIDSafe measures that have been implemented at your site.</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No		
8.	<p>The worker has been provided with details of how to manage Third Parties coming on site or the delivery of regular goods. This includes the process for onsite meetings.</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