**WORKER INDUCTION CHECKLIST**

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| **Name of worker:** |  |
| **Worker Commencement Date:** |  |
| **Induction Date:** |  |
| **Work Health and Safety** | |
| Catholic Church Endowment Society Safety Management Policy and Procedures  WHS and Injury Management responsibilities  Responsibility Authority & Accountability Matrix (copy provided) | Consultation and communication process  Incident/Hazard Reporting process  Grievance procedure  Code of Conduct (copy provided) |
| **Role SpecificInduction** | |
| Inform of known hazards associated with the role and equipment utilised  Risk assessments  SOP / SWP applicable to role | Personal Protective Equipment issued applicable for role  *May use Form 013F for a more comprehensive induction for certain areas* |
| **Emergency Procedures** | **First Aid** |
| Site emergency procedures including names of Wardens  Emergency assembly areas  Security procedures (including remote and isolated work) | Site emergency plan  Name and location of First Aid Officer  First aid kit / first aid Room locations |
| **Training** | **Other** |
| Training Needs identified and documented  Position Information Description signed and copy received  Employee Assistance Program (EAP) details provided to worker | Workers compensation and rehabilitation process explained  Worker made aware of Contact Officer/s  Introduce to WHS Coordinator (where relevant), |
| **Person Conducting Induction** | |
| **Name** |  |
| **Signature** |  |
| **Worker** | |
| **Name** |  |
| **Signature** |  |