

OFF-CAMPUS SAFETY MANAGEMENT : INDUCTION CHECKLIST

Activity	Date
-----------------	-------------

This checklist provides a guide to the safety induction items that may be useful for workers on off-campus activities.

University Off-Campus Activity Supervisor or Co-ordinator has:															
<input type="checkbox"/> provided, where appropriate, a tour (or point out the key features) of the site/area which includes : <ul style="list-style-type: none"> <input type="checkbox"/> location of facilities and amenities <input type="checkbox"/> restricted areas or equipment (unless authorised by the Off-Campus Activity Co-ordinator/Supervisor) 															
<input type="checkbox"/> explained (or reminded) participants of any key hazards that those attending the off-campus activity need to be mindful/aware of															
<input type="checkbox"/> explained any control measures and requirements as per the Risk Assessment (where applicable)															
<input type="checkbox"/> explained to participants how to report a safety issue or incident/Injury <input type="checkbox"/> provided the names of First Aid personnel and information on specific first aid procedures (if applicable)															
<input type="checkbox"/> explained emergency, evacuation and/or contingency procedures, including: <ul style="list-style-type: none"> <input type="checkbox"/> method of raising an alarm, evacuation procedures and location of assembly area/s <input type="checkbox"/> location of first aid and emergency equipment (including, extinguishers, communications) <input type="checkbox"/> emergency contact numbers <input type="checkbox"/> roles and responsibilities <input type="checkbox"/> arrangements for person(s) with a disability (if applicable) 															
<input type="checkbox"/> provided sufficient information, instruction and training to safely complete any activities required during off-campus activities including Safe Operating Procedures where identified by a Risk Assessment.															
<input type="checkbox"/> explained requirements for vehicles on site (if not addressed in the Risk Assessment above)															
<input type="checkbox"/> explained any security arrangements															
<input type="checkbox"/> explained any local fire restrictions and requirements (if applicable)															
<input type="checkbox"/> confirmed that phone contact details are current and key personnel can be contacted if required during the activity															
Other Compliance issues that may apply:															
<input type="checkbox"/> Explained any license/permit compliance requirements (if applicable) <input type="checkbox"/> Explained requirements for the care/protection of children under 18 years (if applicable)															
INDUCTOR	PERSON(S) INDUCTED														
Person conducting the induction	List the workers or attach a list of participants who have been inducted.														
<hr style="width: 80%; margin: 0 auto;"/> Name (Please print)	<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 50%; text-align: center;">Print Names</th> <th style="width: 50%; text-align: center;">Print Names</th> </tr> </thead> <tbody> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> </tbody> </table>	Print Names	Print Names												
Print Names	Print Names														
Date / /															