Reference No: 91692



Inspection - Health and Hygiene Checklist

Major Hazard_COVID 19 Key Control Checklist - Major Hazard_COVID 19 Key Control Checklist

tem #	Prompt	Responses	Comments
1	Operator /Employee Checklist	(X) Yes	
		() No	
		() N/A	
2	Am I physically and mentally fit for work? No fever,	() Established	
	coughing, sore throat and fatigue, anxiety?	() Improvement	
	3 · , ,	Opportunity	
		() N/A	
3	Am I frequently cleaning my hands with alcohol-based	() Established	
	hand sanitizer or washing my hands with soap and	() Improvement	
4	running water? Am I aware that I need to cover coughs and sneezes inside my elbow or a tissue and put used tissues straight into the bin?	Opportunity	
		() N/A	
		() Established	
		() Improvement	
		Opportunity	
		() N/A	
-		` '	
3	Am I making sure I avoid touching my eyes, nose and mouth?	() Established	
		() Improvement	
		Opportunity	
_		() N/A	
5	Am I aware that I need to report to the hospital and isolate	() Established	
	myself / stay at home if I am feeling sick?	() Improvement	
		Opportunity	
		() N/A	
7	Am I exercising, drinking water and getting plenty of	() Established	
	sleep?	() Improvement	
		Opportunity	
		() N/A	
3	Am I maintaining social distancing, where possible, of 1.5 metres?	() Established	
		() Improvement	
		Opportunity	
		() N/A	
9	Am I cleaning and disinfecting regularly used items	() Established	
	through the day, e.g. bench tops, desks, doorknobs, etc?	() Improvement	
		Opportunity	
		() N/A	
10	Am I using the correct PPE, disinfectant chemicals and	() Established	
	materials to prevent / reduce the spread of COVID-19 at	() Improvement	
	the workplace and accommodation?	Opportunity	
		() N/A	
11	Supervisor /Superintendent Checklist	(X) Yes	
	Caper visas y caperintenaent Chicolina	() No	
		() N/A	
12	Are all personnel physically and mentally fit for work? No	() Established	
12	fever, coughing, sore throat and fatigue, anxiety?	, ,	
	lever, coughing, sore throat and latigue, anxiety?	() Improvement	
		Opportunity	
40		() N/A	
13	Are all personnel following best hygiene practice and fully	() Established	
	aware of the symptoms and risks associated with the	() Improvement	
	spread of COVID-19?	Opportunity	
		() N/A	
14	Are all personnel fully aware of what to do if they become	() Established	
	sick or are feeling unwell?	() Improvement	
		Opportunity	
		() N/A	

Item #	Prompt	Responses	Comments
15	Is the workplace set up, where possible, to maintain /	() Established	
	encourage social distancing of 1.5 metres?	() Improvement	
		Opportunity	
		() N/A	
16	Are the correct PPE items, disinfectant chemicals and	() Established	
	materials to prevent / reduce the spread of COVID-19	() Improvement	
	available and accessible to all personnel?	Opportunity	
		() N/A	
17	Have I ensured that there is frequent cleaning and	() Established	
	disinfecting of regularly used / shared items thorough the	() Improvement	
	day, e.g. bench tops, desks, etc?	Opportunity	
	day, e.g. benen tops, desiks, etc:	() N/A	
18	Have all risks associated with appeal of COVID 10 hoop	() Established	
	Have all risks associated with spread of COVID-19 been identified for my work area and have I ensured controls	() Established () Improvement	
	are put in place?	Opportunity	
	Managery / CMC Charlelist	() N/A	
19	Managers / GMS Checklist	(X) Yes	
		() No	
		() N/A	
20	Is the COVID-19 Outbreak Response Plan in place and	() Established	
	am I aware of the plan?	() Improvement	
		Opportunity	
		() N/A	
21	Have I checked that all personnel (especially significant	() Established	
	high risk workers) are up to date with their medical	() Improvement	
	checks?	Opportunity	
		() N/A	
22	Have I ensured that COVID-19 information is available for	() Established	
	all workers and information, healthcare services, support,	() Improvement	
	and resources accessible?	Opportunity	
		() N/A	
23	Is the workplace and accommodation set up, where	() Established	
	possible, to maintain social distancing of 1.5 metres?	() Improvement	
	·	Opportunity	
		() N/A	
24	Are critical items such as PPE, alcohol based hand	() Established	
	sanitizers and disinfectant chemicals/materials in supply	() Improvement	
	and available for personnel to use?	Opportunity	
	•	() N/A	
25	Are isolation and quarantine facilities set up and	() Established	
	procedures in place and communicated to all personnel?	() Improvement	
	p. 2222. 20 in place and communicated to an personner:	Opportunity	
		() N/A	
26	Are the an aite Emergency Medical December trained		
	Are the on-site Emergency Medical Personnel trained,	() Established	
	competent, and fully resourced and available on-call?	() Improvement	
		Opportunity	
		() N/A	

Item #	Prompt	Responses	Comments			
Item #	Explanation					
1	Operator Checklist / Employee Checklist					
2	Am I physically and mentally fit for work? No fever, coughing, sore throat and fatigue, anxiety?					
3	Am I frequently cleaning my hands with alcohol-bawater?	ased hand sanitizer or washing n	ny hands with s			
4	Am I aware that I need to cover coughs and sneez into the bin?	es inside my elbow or a tissue a	and put used tis			
5	Am I making sure I avoid touching my eyes, nose	and mouth?				
6	Am I aware that I need to report to the hospital and isolate myself / stay at home if I am feeling sic					
7	Am I exercising, drinking water and getting plenty of sleep?					
8	Am I maintaining social distancing, where possible	e, of 1.5 metres?				
9	Am I frequently cleaning and disinfecting regularly doorknobs, tools, mobile phones, keys, steering w		ı. bench tops, d			
10	Am I using the correct PPE, disinfectant chemicals the workplace and accommodation?	and materials to prevent / redu	ce the spread c			
11	Supervisor /Superintendent Checklist					
12	Are all personnel physically and mentally fit for wo	rk? No fever, coughing, sore thr	oat and fatigue,			
13	Are all personnel following best hygiene practice a spread of COVID-19?	, , , , ,				
14	Are all personnel fully aware of what to do if they be	become sick or are feeling unwe	II?			
15	Is the workplace set up, where possible, to mainta	in / encourage social distancing	of 1.5 metres?			
16	Are the correct PPE items, disinfectant chemicals available and accessible to all personnel at the wo		e the spread of			
17	Have I ensured that there is frequent cleaning and e.g. bench tops, desks, doorknobs, tools, mobile p					
18	Have all risks associated with spread of COVID-19 are put in place?	been identified for my work are	ea and have I er			
19	Managers / GMS Checklist					
20	Is the COVID-19 Outbreak Response Plan in place	e and am I aware of the plan?				
21	Have I checked that all personnel (especially signi checks?	ficant high risk workers) are up t	to date with thei			
22	Have I ensured that COVID-19 information is avail support, and resources accessible?	able for all workers and informa	tion, healthcare			
23	Is the workplace and accommodation set up, when	re possible, to maintain social di	stancing of 1.5			
24	Are critical items such as PPE, alcohol based hand available for personnel to use?	d sanitizers and disinfectant che	micals/material			
25	Are isolation and quarantine facilities set up and p	rocedures in place and commun	icated to all per			
26	Are the on-site Emergency Medical Personnel train	ned, competent, and fully resour	ced and availal			