

Staff Induction Checklist

Workers Name

Date Commenced

Date of Induction Meeting

Position

To be completed jointly by new worker and Director.

1 Essential Requirements

- ☐ I have read, understood and accept the Code of Conduct
- ☐ I have knowledge of, understand the contents of, and know where to access the policies and procedures relating to:
- The Role and Location of Key Personnel
 - Training and Development Policy
 - Risk Management Policy
 - Incident Management Policy
 - Bullying and Harassment Policy
 - Worker Grievance Policy
 - WH&S Policy
 - Continuous Improvement Policy
 - Feedback & Complaints Policy
 - Safe Environment Policy
 - Violence, Abuse, Neglect & Exploitation Policy
 - Participant Money & Property Policy
 - Professional Boundaries Procedure
 - Privacy Policy
- ☐ I have read, understand and have a copy of the ICAS Staff Handbook
- ☐ I have read, understood and accept all policies and procedures within ICAS' quality system
- ☐ The expectations of my position, my role and responsibilities have been clearly explained to me
- ☐ Current Worker Screening completed
- ☐ NDIS Worker Orientation Module – "Quality, Safety and You" completed (certificate provided)
- ☐ Infection, Prevention and Control Training completed (certificate provided)
- ☐ PPE Training completed (certificate provided)
- ☐ First Aid and CPR completed (certificate provided)
- ☐ I am aware of my responsibility to maintain my work area in a safe and tidy manner and report any hazards
- ☐ I am aware that it may be advisable to inform the Director of any pre-existing illness or condition which may affect my work at this worksite (*to facilitate provision of appropriate support as necessary*).

2 Documents

- | | |
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| <input type="checkbox"/> Worker Screening evidence on Register | <input type="checkbox"/> Employee Record Card signed |
| <input type="checkbox"/> Position Description | <input type="checkbox"/> Current Drivers Licence (copy provided) |
| <input type="checkbox"/> Employee Contract completed and signed | <input type="checkbox"/> Current Passport (copy provided) |
| <input type="checkbox"/> Declaration to Maintain Confidentiality signed | <input type="checkbox"/> Motor Vehicle Registration (copy provided) |
| <input type="checkbox"/> Code of Conduct signed | <input type="checkbox"/> Motor Vehicle Insurance (copy provided) |
| <input type="checkbox"/> Employee Details for Xero signed(including TFN) | <input type="checkbox"/> Any Qualifications (copy provided) |

I declare I have completed the Checklist and all boxes are ticked.

I confirm that I have completed ICAS' formal induction process and have understood the information provided to me. I accept my personal responsibility to abide by the policies, procedures and practices of ICAS.

Name

Signature

I confirm that all areas of induction have been completed. A signed copy of this Checklist has been placed in the workers personnel file.

Director (or nominee)

Date