

# COVID WORKPLACE

# RISK ASSESSMENT

**COMPANY:** \_\_\_\_\_

**SITE:** \_\_\_\_\_

The Omicron variant has radically changed the risk of COVID transmission in the workplace and community. Use the following checklist to ensure whether your company is taking the necessary steps to protect your health and safety, the welfare of your families, communities, and others in the workplace.

<b>RISK ASSESSMENT</b>	<b>YES</b>	<b>NO</b>	<b>UNSURE</b>
Has your company undertaken a new risk assessment for the Omicron variant?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Have you or HSR's/ delegates/ or members sighted the new risk assessment?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Has the company consulted with UWW & UWW members about the development and implementation of the new health and safety measures?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

<b>RAT/PPE</b>	<b>YES</b>	<b>NO</b>	<b>UNSURE</b>
Do you have access to Rapid Antigen Tests (RAT)?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
If you do not have access to RATs are there other effective control measures in place?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Are the RAT's provided free of charge?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Are RAT's done on paid time?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Do you have access to PPE such as face masks, face shields etc?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Are provided masks N95 or P2?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

<b>VENTILATION</b>	<b>YES</b>	<b>NO</b>	<b>UNSURE</b>
Do you think indoor airflow is adequate?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Has air filtration been installed in break rooms?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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## CLEANING

How often is your workplace cleaned?

SHIFT	DAILY	WEEKLY
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

## SPECIAL LEAVE

Do you have access to additional leave if you contract COVID-19?

YES	NO	UNSURE
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Do you have access to additional leave if you are a close contact?

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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## REPORTING POSITIVE CASES

Has there been a confirmed COVID-19 case in your workplace?

YES	NO	UNSURE
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Did your employer inform HSRs/delegates and UWU Organisers asap of the case?

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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Did your employer ensure isolation and testing of all close contacts, including sub-contractors, labour hire/agency workers on site?

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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## COMMUNICATION

Has information been provided in languages other than English when needed?

YES	NO	UNSURE
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**If your employer fails this checklist, you, your family and your community are at heightened risk.**

**Completed by:** \_\_\_\_\_

I am a (tick boxes that apply):

HSR

DELEGATE

UWU MEMBER

Once completed return to your organiser or [covidhotline@unitedworkers.org.au](mailto:covidhotline@unitedworkers.org.au)