

## ORIENTATION CHECKLIST FOR NEW/YOUNG EMPLOYEES

Employee Name: \_\_\_\_\_

Date of Hire: \_\_\_\_\_

Employee Position: \_\_\_\_\_

Worksite: \_\_\_\_\_

### Instructions to Human Resources Department:

- a) Indicate completion of task by placing your initials in the box provided.
- b) Place one copy in personnel file and then forward the original form to the Supervisor/Designate for completion.
- c) Follow up with Supervisor to ensure timely completion of this Checklist.
- d) When all activities have been completed, the original copy is to be placed in the employee's personnel file, with a copy to the employee and a copy filed at the employee's worksite.

### Human Resources Documentation:

- Employee has provided written acceptance of job offer, and given all necessary payroll and benefit plan info and forms.
- Employee has been provided with a copy of the Collective Agreement.
- Employee has been provided the name of his/her immediate Supervisor.
- Request for Internet Access and Email set up has been sent to Computer Technician.
- Request for key and access code has been sent to the Operations Supervisor.
- Employee has been provided with information pertaining to evaluation (VIWTU) or probationary period (CUPE).
- Employee has completed pre-employment courses: New Worker Safety Orientation \_\_\_\_; WHMIS \_\_\_\_; Bullying and Harassment Awareness \_\_\_\_.
- Employee has current certification with the BC Teacher Regulation Branch (if applicable).

### District Policies:

The employee has been provided with an explanation of the following:

- Board Policy B.4, *Travel and Meals*
- Board Policy B.12, *Health and Safety*
- Board Policy B.13, *Bloodborne Pathogens*
- Board Policy B.14, *Rental Accommodations* (if applicable)
- Board Policy B.15, *Collection, Protection of and Access to Personal Information of Private Individuals*
- Board Policy B.22, *Safety of Board Personnel and Trustees When Travelling on School District Business* (if applicable)
- Board Policy B.27, *Kyuquot Truck and Boat Policy and Regulation* (for new Kyuquot School employees only)
- Board Policy B.28, *Emergency Preparedness*
- Board Policy D.1, *Complaints Regarding Employees*
- Board Policy D.10, *Respectful Workplace*
- Board Policy D.13, *Violence in the Workplace*
- Board Policy E.5, *Child Abuse*
- Board Policy E.31, *Acceptable Use of Computer Network and Internet*
- Board Policy E.38, *Risk of Anaphylaxis in School District 84*

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The above policies have been reviewed with the employee:

Employee's Name: \_\_\_\_\_ Date: \_\_\_\_\_

Employee's Signature: \_\_\_\_\_ Supervisor or Designate's Signature: \_\_\_\_\_

Orientation Checklist for New/Young Employees (continued)

**Directions for Worksite Supervisor or Designate:**

- a) Coordinate the completion of each of the tasks indicated on this checklist.
- b) **All health and safety orientation and training specific to the new or young worker's workplace MUST be completed before the worker begins work.** The remaining orientation process to be completed within one week of employee's commencement of work.
- c) Indicate completion of task by placing your or Designate's initials in the box provided.
- d) When all activities have been completed, the Worksite Supervisor or Designate and employee are to sign the form as verification that the required orientation took place.
- e) Return original copy to District Office and retain one copy at your worksite.

Topic	Initials (Trainer)	Initials (Worker)	Comments
<b>Introduction and Welcome:</b>			
· Employee has been told of smoke-free (and scent-free or other allergens, if applicable) environment and shown the location of lunch and restroom facilities, and all building exits.			
· Employee has been shown how to access e-mail and how to obtain computer assistance, when required.			
· Employee has been shown ( <i>on SD84 website</i> ) the location of the District Policy Manual, District Health and Safety Program, and the Workers' Compensation Act and Regulations.			
<b>The employee has been informed of the following:</b>			
· Name of worksite's Health and Safety rep and/or Health and Safety Committee members.			
· Location of OH&S bulletins, notices, minutes of meetings, and MSDS (material safety data sheets).			
· Name of First Aid Attendant(s), how to summon first aid, location of First Aid room, eyewash facilities, and requirement to report all injuries and illnesses to FAA <u>first</u> .			
· Emergency procedures including evacuation and fire alarm drills and procedures, location of emergency exits and supplies, and employee's role in the event of emergency.			
· Intruder and lock-down procedures.			
· Bomb threats and custody alerts.			
· Working alone or in isolation procedures.			
· Measures to reduce the risk of workplace violence and procedures for dealing with violent situations; student safety plans to be reviewed before starting work; reporting procedures for violent incidents.			
· Worksite hazards to which the worker may be exposed (e.g. risks from robbery, assault, confrontation, or hazardous materials).			

**Orientation Checklist for New/Young Employees** (continued)

· Biohazardous Control Program – Universal Precautions and reporting of contact with biohazardous materials.			
· Reporting procedures for accidents (including near misses) and hazards (“Find a Hazard”).			
· Driving District vehicles, if applicable, re booking process, emergency procedures and familiarity with vehicle (includes Kyuquot School boat, if applicable).			
· Personal protective equipment (PPE) – what to use, when to use it and where to find it.			
· How to use office equipment within the worksite (e.g. photocopier).			
· How to report concerns regarding air quality in the worksite.			
· How to use the alarm system, including the gymnasium.			
· Instruction and demonstration of work tasks or work processes, specifically: (1) _____ (2) _____ (3) _____ (4) _____ <i>(If additional space is required, use separate sheet and attach to this report.)</i>			
· Safety – If in doubt, ASK questions! DON’T DO!			
<b>Employee Responsibility:</b>			
· Work ethics			
· Communication – District protocol			
· Electronic Leave Management System – Employee has been shown how to request leaves and (for on-call employees) how to report time worked when not replacing an employee.			
· Leave of absence as a result of inclement weather; i.e. no pay unless road closed by Highways Department or RCMP – or leave can be charged to personal business or vacation, if available.			
· Supervisory Chain of Command			

**Orientation Checklist for New/Young Employees (continued)**

<p>· I have read and understand Division 3, 116 of the WCB Act:</p> <p><u>General Duties of Workers</u>  <b>116</b> (1) Every worker must</p> <ul style="list-style-type: none"> <li>(a) take reasonable care to protect the worker's health and safety and the health and safety of other persons who may be affected by the worker's acts or omissions at work, and</li> <li>(b) comply with this Part, the regulations and any applicable orders.</li> </ul> <p>(2) Without limiting subsection (1), a worker must</p> <ul style="list-style-type: none"> <li>(a) carry out his or her work in accordance with established safe work procedures as required by this Part and the regulations,</li> <li>(b) use or wear protective equipment, devices and clothing as required by the regulations,</li> <li>(c) not engage in horseplay or similar conduct that may endanger the worker or any other person,</li> <li>(d) ensure that the worker's ability to work without risk to his or her health or safety, or to the health or safety of any other person, is not impaired by alcohol, drugs or other causes,</li> <li>(e) report to the supervisor or employer             <ul style="list-style-type: none"> <li>(i) any contravention of this Part, the regulations or an applicable order of which the worker is aware, and</li> <li>(ii) the absence of or defect in any protective equipment, device or clothing, or the existence of any other hazard, that the worker considers is likely to endanger the worker or any other person,</li> </ul> </li> <li>(f) cooperate with the joint committee or worker health and safety representative for the workplace, and</li> <li>(g) cooperate with the Board, officers of the Board and any other person carrying out a duty under this Part or the regulations.</li> </ul>			
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**Mentor assigned:** Name of Mentor: \_\_\_\_\_ School: \_\_\_\_\_

**Additional employee training is required, pertaining to:** *(please use additional paper, if necessary)*

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**Supervisor/Designate Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**TO BE COMPLETED BY EMPLOYEE:** This form has been reviewed by me and I understand its contents. I will not engage in any work or job task which can put me or another worker at risk of being injured. I understand that under the District's Health and Safety Program and WorkSafeBC Regulation, I have not only the right but the obligation to refuse unsafe work. In addition to the above, I request further information and training on the following:

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**Employee Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_