**TRAINING SESSION / ACTIVITY CHECKLIST**

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|  | | **Session 1** | | **Session 2** | | | **Session 3** | | | **Session 4** | | |
| TRAINING SESSION | |  | |  | | |  | | |  | | |
| NAME: COVID-19 ACTIVITY LEAD / COORDINATOR | |  | |  | | |  | | |  | | |
| DATE | |  | |  | | |  | | |  | | |
| TIME | |  | |  | | |  | | |  | | |
| **HYGIENE** | | **YES** | **NO** | | **YES** | **NO** | | **YES** | **NO** | | **YES** | **NO** |
| 1 | Hand Sanitizers are available at key areas. |  |  | |  |  | |  |  | |  |  |
| 2 | Soap is available at all hand washing facilities. |  |  | |  |  | |  |  | |  |  |
| 3 | Waste bins in place. |  |  | |  |  | |  |  | |  |  |
| 4 | High touch facilities disinfected before and after training. |  |  | |  |  | |  |  | |  |  |
| 5 | Disinfectant available for all attendees to clean down surfaces as required. |  |  | |  |  | |  |  | |  |  |
| **Documentation** | | **YES** | **NO** | | **YES** | **NO** | | **YES** | **NO** | | **YES** | **NO** |
| 6 | Have attendees provided Pre-Return Self Declaration Form? |  |  | |  |  | |  |  | |  |  |
| 7 | Have all forms been checked and confirmed on arrival? |  |  | |  |  | |  |  | |  |  |
| 8 | Has the club received any return from illness forms? |  |  | |  |  | |  |  | |  |  |
| **Communication** | | **YES** | **NO** | | **YES** | **NO** | | **YES** | **NO** | | **YES** | **NO** |
| 9 | Is signage is in place, visible, and up-to-date? |  |  | |  |  | |  |  | |  |  |
| 10 | Have attendees received induction training? |  |  | |  |  | |  |  | |  |  |
| 11 | Have toolbox talks been carried out? |  |  | |  |  | |  |  | |  |  |
| **Check-in** | | **YES** | **NO** | | **YES** | **NO** | | **YES** | **NO** | | **YES** | **NO** |
| 12 | Queuing system in place and being observed. |  |  | |  |  | |  |  | |  |  |
| 13 | Sanitiser available for Attendees as required. |  |  | |  |  | |  |  | |  |  |
| 14 | Signage in place at check-in. |  |  | |  |  | |  |  | |  |  |
| **Attendees** | | **YES** | **NO** | | **YES** | **NO** | | **YES** | **NO** | | **YES** | **NO** |
| 15 | Attendees briefed on training activities. |  |  | |  |  | |  |  | |  |  |
| **Training Activities** | | **YES** | **NO** | | **YES** | **NO** | | **YES** | **NO** | | **YES** | **NO** |
| 16 | Training activities in line with government guidelines. |  |  | |  |  | |  |  | |  |  |
| **Equipment Use** | | **YES** | **NO** | | **YES** | **NO** | | **YES** | **NO** | | **YES** | **NO** |
| 17 | Equipment sanitised before training session. |  |  | |  |  | |  |  | |  |  |
| 18 | Equipment sanitised after training session. |  |  | |  |  | |  |  | |  |  |
| **Sanitization** | | **YES** | **NO** | | **YES** | **NO** | | **YES** | **NO** | | **YES** | **NO** |
| 19 | Has the rubbish been disposed of appropriately? |  |  | |  |  | |  |  | |  |  |
| 20 | Have all surfaces and touchpoints cleaned thoroughly? |  |  | |  |  | |  |  | |  |  |
| 21 | Have all toilets and sinks been disinfected? |  |  | |  |  | |  |  | |  |  |
| 22 | Hand washing facilities include soap hot water, disposable towels in place. |  |  | |  |  | |  |  | |  |  |
| **Deliveries** | | **YES** | **NO** | | **YES** | **NO** | | **YES** | **NO** | | **YES** | **NO** |
| 23 | Were there any schedule deliveries? |  |  | |  |  | |  |  | |  |  |
| 24 | Were they wearing appropriate PPE? |  |  | |  |  | |  |  | |  |  |
| 25 | Was physical distance practiced on arrival? |  |  | |  |  | |  |  | |  |  |
| ***Other: Site Specific Items*** | | **YES** | **NO** | | **YES** | **NO** | | **YES** | **NO** | | **YES** | **NO** |
| 26 | *TBC by Club* |  |  | |  |  | |  |  | |  |  |
| 27 | *TBC by Club* |  |  | |  |  | |  |  | |  |  |
| 28 | *TBC by Club* |  |  | |  |  | |  |  | |  |  |
| 29 | *TBC by Club* |  |  | |  |  | |  |  | |  |  |

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| **NOTES / ITEMS REFERRED TO COVID-19 COORDINATOR** |
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