

## WORK INTEGRATED LEARNING / PLACEMENT | RISK MANAGEMENT CHECKLIST

The WIL Risk Management Checklist (SMHS) ensures there is a mutual understanding of the risk management responsibilities of the student, host organisation and ECU supervisor. Refer to the [Work Integrated Learning Risk Management Guideline](#) for further information.

### WIL / PLACEMENT ACTIVITY DETAILS

Course Title:

Unit Code and Title:

Placement Location:

Placement Dates:

From:

To:

Description of Placement Tasks/Project:

Indicate any specific safety equipment and/or accommodation requirements:

### STUDENT AGREEMENT

Student Name:

Student Number:

Student Contact:

Emergency Name:

Contact Number:

1. An approved WIL activity/placement has been allocated to me OR has been approved by my ECU Unit Coordinator if I have sourced a placement on my own.
2. I have updated my emergency contact details on SIMO.
3. I have read and understood the ECU [WIL Guidelines for Students](#).
4. I have read and understood that I am required to act in accordance with the ECU [Student Code of Conduct](#) at all times during my placement.
5. I will attend the Work Health and Safety induction at my host organisation and ensure my familiarity with:
  - Health and safety policies and requirements;
  - Emergency and evacuation procedures;
  - First aid arrangements;
  - Procedures for reporting incidents; and
  - The name and location of the health and safety representative.
6. I will ensure I inform my ECU supervisor and host organisation immediately if I become aware of a hazard or I am involved in an accident or incident during my placement.
7. I will act, at all times, with reasonable care within the host organisation workplace.
8. I will comply with my host organisation's policies regarding intellectual property and will take reasonable care to protect the confidential or private information of the host organisation.
9. I will comply with my host organisation's policies regarding COVID-19, including their COVID-19 Safety Plan and any government or workplace restrictions arising from COVID-19.
10. I will notify my ECU supervisor immediately if there is anything which may impact on the successful completion of my placement, or if I believe I do not have the capacity to safely and/or competently continue my placement.

Student Signature:

Date:

## HOST AGREEMENT (WORKPLACE SUPERVISOR)

Host Organisation:

Host Supervisor Name:

Job Title:

Email:

Work Phone:

Mobile Number:

1. I have read and understood the ECU *WIL Guidelines for Host Organisations (SMHS)* (enclosed).
2. The organisation has appointed a workplace supervisor to appropriately supervise the student during their placement.
3. I have provided the student with an induction to the workplace including a work health and safety induction.
4. I confirm the organisation has appropriate insurance policies in place and will provide the certificate of currency of our public liability insurance policy to the ECU Supervisor on request, if required.
5. I will maintain appropriate contact with the ECU Supervisor and will inform the ECU Supervisor immediately if the student is involved in an accident, incident or near miss.
6. I will ensure all tasks provided to the student are within the scope of the student's placement agreement and will not ask the student to perform tasks beyond their capabilities.

Workplace Supervisor Signature:

Date:

## ECU SUPERVISOR AGREEMENT

ECU Supervisor Name:

ECU Supervisor Email:

ECU Supervisor Work Phone:

Mobile Number:

1. I have read and understood the ECU [WIL Guidelines for Staff](#).
2. I will provide appropriate supervision of the student during the placement.
3. I will ensure the student is provided with relevant induction to the host organisation, including a work health and safety induction.
4. I will ensure all accidents, incidents and near misses are reported in accordance with ECU Incident Management and Reporting guidelines.
5. I have received confirmation from the host organisation that they have processes to ensure the safety of students on placement.
6. I have provided the workplace supervisor with an overview of the assessment outcomes required by the student and will be in regular contact with the workplace supervisor during the placement.

ECU Supervisor Signature:

Date:

### **Document Management Process:**

1. The student must email the checklist (signed by both student and workplace supervisor) to the Placement Coordinator.
2. Once checked and signed by the Placement Coordinator, a pdf copy will be emailed to the student.
3. The student must upload completed documentation to SONIA and provide a PDF copy to the workplace supervisor.