Volunteer Workforce Risk Assessment

Template

The following template has been developed by Museums & Galleries Queensland in consultation with Volunteering Queensland to assist organisations with the process of volunteers returning safely to the workplace.

This template is intended as a guide and will need to be changed to meet your organisation’s specific needs.

It is recommended that museums and galleries reinstating their volunteer programs seek independent advice to ensure that their volunteer measures comply with their organisation’s insurance policies, public health authority guidelines and Workplace Health & Safety legislation.

Volunteer Workforce Risk Assessment

[insert organisation name]

**ADVICE FOR VOLUNTEERS**

People aged 70 and over, people with chronic medical conditions, and people with compromised immune systems are at greater risk of serious illness if they are infected with coronavirus (COVID-19).

Volunteers who fall into the above groups may return to the workplace provided the risk to their health can be safely mitigated. To determine the potential risks and/or to identify measures to reduce the potential risks to a volunteer’s health, a risk assessment must be undertaken. If the risks cannot be mitigated, alternative arrangements must be considered, including redeployment to a noncustomer-based role, or accommodating a workplace absence.

Considering the above advice, all volunteers are required to complete the below risk assessment questionnaire and return it to [insert who/position within the organisation] so that an assessment for each individual can be made in line with our organisation’s obligations. Due to the importance we place on everyone’s health, it is mandatory to complete this questionnaire in full prior to a volunteer’s return to the workplace. Information provided will be treated confidentially.

|  |  |
| --- | --- |
| Name: | Age:  |

|  |  |  |  |
| --- | --- | --- | --- |
| Do you have a chronic or underlying health condition? | [ ] Yes | [ ] No | [ ] Unsure |
| Do you identify as Aboriginal or Torres Strait Islander? | [ ] Yes | [ ] No | [ ] Unsure |
| Have you returned from overseas in the past 14 days? | [ ] Yes | [ ] No | [ ] Unsure |
| Have you visited a COVID-19 hotspot in the past 14 days or since the hotspot was declared (whichever is shorter)?  | [ ] Yes | [ ] No | [ ] Unsure |
| Have you been in contact with someone who has returned from an identified COVID hotspot or from overseas in the past 14 days? | [ ] Yes | [ ] No | [ ] Unsure |
| Have you been in recent contact with someone diagnosed with COVID-19? | [ ] Yes | [ ] No | [ ] Unsure |
| Do you have a fever or any symptoms of COVID-19 including cough, shortness of breath, sore throat, runny nose, or nasal congestion? | [ ] Yes | [ ] No | [ ] Unsure |
| Have you had or do you intend to have a COVID vaccination? | [ ] Yes | [ ] No | [ ] Unsure |

[ ]  I understand the inherent risk, government restrictions and recommendations that currently exist to manage the COVID-19 pandemic and wish to continue with [insert organisation] in my current capacity. I will advise [insert organisation] should any answers to the above questions change prior to undertaking any future volunteer work.

|  |  |
| --- | --- |
|  |  |
| Signature | Date |

Office Use Only - An assessment of the above answers has been made and at this time, they are deemed as:

[ ]  Suitable to continue.

[ ]  To be advised of current recommendations and ask to consider options.

[ ]  Asked to undertake other duties or stand down until such time as deemed appropriate by management.