ASSESSMENT RECORD (For Candidate Name Candidate Name Record the results of the assessment in the boxes Indicate whether the student has been assessed as Multiple attempts can be permitted.	Date $2/7/17$ es below, with additional comments as required.
BSBWHS201A Elements	C NYC Comments
2.1 Identify <i>designated persons</i> for reporting queries and concerns about safety in the workplace	
2.5 Identify WHS <i>duty holders</i> in own work area and their duties	
3.2 Raise WHS issues with designated persons according to organisational procedures	
The candidate has been informed of the assessment rereasons for the decision. Assessor	Date 2 (C)
Candidate	Date
·····	
SAFETY PASSPORT CERTIFICA	TE (For Students) – LESSON 3

Once **all the competencies** have been met for this lesson, students can have their teacher/trainer sign the certificate below, then cut out and insert the certificate into their personal Safety Passport.

	WORKSAFE PTO for more details This card is evidence that	Competencies of Lesson 3 (Employer Responsibilities) 2.1. Identify <i>designated persons</i> for reporting queries and concerns about safety in the workplace 2.5. Identify WHS <i>duty holders</i> in own work area and their duties 3.2. Raise WHS issues with de lignated persons according to organisational procedures
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Employer Duty of Care Survey (sample)

To determine your commitment to health and safety within the workplace, please answer the following questions	Yes	No
Are you aware of current occupational health and safety legislation and	163	NO
what you are responsible for?		
Do you have a written occupational health and safety policy accessible		
to all staff?		
At meetings, is health and safety frequently discussed?		
Are staff members given the opportunity to express their concern?		
Do you think employees are comfortable about expressing their concerns?		
Do you follow up on the issues raised by your staff?		
Do you have any proactive maintenance of equipment and machinery?		
After an incident investigation, are preventative actions recommended?		
If yes, are these recommendations given high priority?		
Do you enforce proper work procedures, regardless of the work schedule?		
Do you ensure that proper procedures are reviewed before new staff start?		
Do you discourage shortcuts?		
Do you make sure you have enough staff to handle the workload without incident?		
Are health and safety concerns considered in budget planning?		
Do you take an active role in the occupational health and safety of the workplace?		

If the answer is yes to all these questions, then the employer is probably very committed and involved in the workplace's occupational health and safety processes.

Employee/Student Comments_____

Interviewer_____

Interviewee_____

Date_____

Employer Duty of Care Survey

To determine your commitment to health and safety within the		
workplace, please answer the following questions	Yes	No
Are staff members given PPE?		\checkmark
Do you give them proper safety training?	V _	
Do you frequently review health and safety at meetings?		
Do you always report whenever there is an accident?		
Are you aware of possible risks?		
Do you have training about emergency procedures?		
Does your staffs know where fire extinguisher, first aid kits and other emergency equipment located?		
Do you discuss when a staff has a problem?	\checkmark	
How do you operate when there's an emergency?		
In budget planning, do you make sure health and safety concerns are considered?		
Do you check machines regularly?		
Do you have a health and safety officer?		
Do you think employees are comfortable with their task?	\checkmark	

If the answer is yes to all these questions, then the employer is probably very committed and involved in the workplace's occupational health and safety processes.

Employee/Student Comments_____

Interviewer	Chad Mateo			
Interviewee_ Date_	Crieg	Blan		
12/2/17				