



Orientation Checklist – Volunteers

Volunteers at York Region District School Board Schools or Workplaces

Please ensure this checklist is completed for volunteers who **volunteer on a continuous or consistent/more frequent basis.**

Safety:

- **Site Specific Information** e.g., scent, allergy awareness
- **Safe Operation of Equipment**, as needed
- **Potential Hazards** - tour the work areas/ facility and discuss work area hazards and safe work practices
- **Reporting of Unsafe Conditions** - explain how to report an unsafe condition
- **Emergency Procedures** - review school/office specific emergency procedures (e.g., lockdown, hold-and-secure), explain evacuation signals and procedures, point out exit routes and the designated assembly area and review any specific responsibilities during an evacuation
- **Violence in the Workplace** - share Safety Plans, IAPs if needed, and procedures to follow
- **WHMIS** - remind volunteers not to bring chemicals into the school
- **Personal Protective Equipment (PPE)** - review, if needed
- **In Case of Injury/Accident** - review the reporting procedures in the event of an injury and/or accident
- **First Aid** - names of/how to contact first aid trained staff and location(s) of first-aid kits and eye-wash facilities
- **Automated External Defibrillator (AED)** - identify location
- **Student Medical Information** - review applicable student medical information (e.g., concussion history, anaphylaxis, etc...), supervision and safe participation protocols, as required.

Vulnerable Sector Check/Confidentiality:

- **Vulnerable Sector Check** - current Vulnerable Sector Check (within 6 months) or Signed Annual Declaration
- **Confidentiality Agreement** - signed

AODA:

- view module: <http://www.ohrc.on.ca/en/learning/working-together-code-and-aoda>

Human Rights:

- view module: <http://www.ohrc.on.ca/en/learning/human-rights-101>

Liability Insurance:

- **Volunteer Driver Form** - completed, if needed

Volunteer Name: _____

Volunteer's Signature: _____ Date: _____

Supervisor's Signature: _____ Date: _____