





Please use the following form to document your plan for how your staff and patrons will be kept safe.

Premises name:

Agrees to the following safety requirements:

Maintain mandatory contact registration

Maintain hygiene standards and conduct frequent cleaning

Maintain physical distancing

Carefully manage shared spaces to ensure physical distancing

- Refer to the **COVID Safety Guidelines** for information on the expectations for COVID Safety Plans and to assist you in completing this plan. These are available at **wa.gov.au**
- Discuss and share relevant details of your plan with staff, contractors and suppliers so everyone is aware of what to do and what to expect.
- The COVID-19 pandemic is an evolving situation review your plan regularly and make changes as required.
- Print and display the **COVID Safety Plan Certificate** available at the end of this form.



| Premises details | | | | | | | |
|---|--|---------------------|-------------------|--|--|--|--|
| Premises name: | | Prepared by: | | | | | |
| Type of premises: | | Position title: | | | | | |
| Street address: | | Completion date: | | | | | |
| Contact no: | | Revision date: | | | | | |
| Email: | | | | | | | |
| For the sections below, please complete the form and attach additional pages or information as required. 1. Contact registration | | | | | | | |
| | e to implement contact registra | tion requirements? | | | | | |
| ensuring | quirements to manage, store ang SafeWA QR codes are easily a is available. | - | _ | | | | |
| | | | | | | | |
| | | | | | | | |
| 2. Physical distance | rina | | | | | | |
| 2. Physical distance • What will be done | ing e to implement physical distanc | ing principles? | | | | | |
| What will be done | | | aiting areas etc. | | | | |
| What will be done | e to implement physical distanc | | aiting areas etc. | | | | |
| • What will be done Consider: physical | e to implement physical distanc | | aiting areas etc. | | | | |
| • What will be done Consider: physical 3. Hygiene | e to implement physical distanc | s; management of wa | aiting areas etc. | | | | |
| • What will be done Consider: physical 3. Hygiene • How will you ensu | e to implement physical distanc | are maintained? | | | | | |
| • What will be done Consider: physical 3. Hygiene • How will you ensu | e to implement physical distance distancing for staff and patron | are maintained? | | | | | |

| How will you ensure all your workers know how to keep themselves and others safe from exposure to COVID-19? |
|---|
| Consider: staff training; records of training; additional education; signage; guidance material etc. |
| |
| |
| 5. Compliance |
| • I am aware that in addition to the legal obligations arising from the Emergency Management Act 2005 and the Directions made under that Act, I must continue to comply with relevant existing legislation and regulations, including WorkSafe legislation. |
| Yes No |
| Comments: |
| |
| 6. Response planning |
| How will you respond to an exposure or suspected exposure to COVID-19 within your premises? |
| Consider: records of patrons; cleaning procedures; referrals to relevant authorities; regular review of procedures etc. |
| |





| Premises name: | | |
|----------------|--|--|
| | | |

Phase 5 COVID Safety Plan Certificate

Welcome. We are a business implementing COVID-safe principles.



Contact registers



Physical distancing



Frequent cleaning and disinfection



Manage shared spaces

| Prepared | by: |
|----------|-----|
|----------|-----|

Date

We're doing our part to help keep you safe. Please respect the rules and our staff.



We're all in this together.