

APPROVAL FOR RECOMMENCING SERVICES AND OR ACTIVITIES

CMT agreed that CMT approval (including development of a risk assessment, COVID-19 Safe Plan and Brief) will not be required for the reinstatement of services and/ or activities that comply with the requirements outlined in the UnitingCare COVID-19 Safe Plan. Where reinstatement of the service and / or activity does not comply with the UnitingCare COVID-19 Safe Plan. Where reinstatement of the service and / or activity does not comply with the UnitingCare COVID-19 Safe Plan. Where reinstatement, COVID-19 Safe Plan and Brief requesting CMT approval.

I have reviewed the UnitingCare COVID-19 Safe Plan 🗌 Yes 🗌 No

ACTIVITY OR SERVICE EVALUATION FOR RECOMMENCEMENT		PLEASE ADVISE STRATEGY OR NOT APPLICABLE (N/A)										
Service / Activity	vice / Activity Details (describe activity)		Temp Checking & Screening	Food Services	Social Distancing	Hygiene		Workplace Cleaning	Immunisation	Resources/ Equipment	Other	
Training												
Clinics/Groups eg podiatry, wound care, exercise												
Volunteer Services												
Student Placement												
Other - please state												
	Podiatry student to join the Podiatrist on community visits	student to sit in back seat of car	if student unwell not to come to work	n/a	student to comply with social distancing with staff member and clients	Student comply all hygie requirer	with ene	clean car as per vehicle cleaning requirements	n/a	n/a		
lame of Service			— If strate	General Manag								
Service Manager/Delegate Name				If strategies meet COVID-19 Safe Plan, GM can approve.				Signature				
Signature				If no to any questions please escalate to Ops Team for a risk assessment, Covid Safe Plan and Brief for approval by CMT.				Approval 🗌 Yes 🗌 No				
Date			•					Escalation to and date				