1. workplace learning management plan

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| School: | | | | | | |
| Students (Attach List): | | | | | | |
| Telephone: | | | Email | | | |
| Workplace Learning (WPL) Coordinator: | | | Contact details: | | | |
| VET Coordinator: | | | Contact details: | | | |
| Types of Workplace Learning Program |  | ADWPL Course  (SCSA) |  | Work Experience |  | Work Shadowing |
|  | Part of a VET Program |  | SBT/SBA/ASBT/PAIS |  | Other (e.g. Internship) |
| Dates: | | | | | | |

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| **PURPOSE** | |
| *Workplace Learning Program (see Workplace Learning Guidelines)*   * Describe the educational purpose for the workplace learning program. * Include decisions about the school’s capacity and need to have a workplace learning program. | |
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| **ASSESS RISKS** | |
| *Workplace environment (see Workplace Learning Guidelines)*   * Provide work site assessment processes to be used when: * matching the activities at the worksite to student aspirations and capabilities, and expected workplace learning program outcomes; and * considering whether the site supports the safety and welfare of the student(s). * Once undertaken, provide evidence that a site suitability pre-placement visit has been carried out for each site used. * Confirm that the employer section of the Student Placement Record (Appendix B2) has been completed or that the necessary documentation (Appendix C) has been retained for SBA/Ts. | |
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| *Transport arrangements (see Workplace Learning Guidelines)*   * Identify possible transport needs for workplace learning participants, including students, staff and other members of supervisory team(s). * Provide strategies for attending to identified transport needs that mitigate risks related to safety, compliance, complaint or general welfare. * If a vehicle accident occurs, attach evidence of any motor vehicle accident claims. | |
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| **STUDENT/S** | |
| *Selecting students (see Workplace Learning Guidelines)*   * Outline the process(es) for selecting students for each WPL program. * Outline processes for confirming students’ work readiness. * Confirm that worksite choices accommodate students’ needs and capabilities, including provisions for students with special needs (e.g. CALD, intellectual or physical disability, specified health issues, etc.). * Describe the process for confirming that any pre-requisites necessary for student(s) to engage with specific work places have been met (e.g. White Card for construction sites). * Identify key components of a student’s induction program, including familiarising students with the conduct appropriate for a workplace. * Once students are selected and placements are organised, attach: * the completed Student Placement Record (Appendices B1, B2, B3 and B4) for each placement undertaken by each student; * details of any special needs of students and provisions made; and * a schedule of student induction sessions and confirmation they have been undertaken prior to commencing work on site. * For SBA/Ts, the documentation identified in Appendix C can substitute for the Student Placement Record. | |
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| **SUPERVISOR/SUPERVISORY TEAM** | |
| *Establishing supervisor/supervisory team (see Workplace Learning Guidelines)*   * Outline the process(es) for selecting a supervisor/supervisory team with the relevant capabilities for each WPL program. * Identify the roles and responsibilities for the supervisor/supervisory team. * Identify key components of a supervisor/supervisory team induction program. * Where applicable only, prepare a Memorandum of Understanding, for negotiation in circumstances where a third party is involved. * Once established, attach details of: * the supervisor/supervisory team, including names, positions, contact details, role in the team; and * confirmation that each supervisor/supervisory team member has been inducted, has had any gaps identified and related resources/professional learning planned to enable them to carry out assigned duties and roles. | |
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| **SUPERVISION STRATEGY** | |
| *Establishing a supervision strategy for each WPL program (see Workplace Learning Guidelines)*   * Detail the workplace supervision strategies that need to be established, including where external agencies are used to source and/or organise work placements. * Identify the criteria to be checked during monitoring visits, including frequency. * Clarify how responsibility for supervision during non-work times is covered, e.g. at lunch times.   + Once WPL program is arranged, attach a schedule of monitoring visits and, as carried out, a summary of findings for each. | |
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| **COMMUNICATION STRATEGY** | |
| *Establishing a communication strategy (see Workplace Learning Guidelines)*   * Outline the strategy to be used to communicate with all parties. * Include as a component of student, supervisor/supervisory team and employer inductions. | |
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| **EMERGENCY RESPONSE STRATEGY** | |
| *Establishing an emergency response strategy (see Workplace Learning Guidelines, the Occupational Safety and Health Policy and the Emergency and Critical Incident Management Policy)*   * Detail an emergency response plan (including relevant contact information, arrangements for accidents/emergency situations in the workplace and measures to address bullying or harassment in the workplace). * Include as a component of the communication strategy and stakeholder induction processes. | |
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| **WORKPLACE EMPLOYERS** | |
| *Employer selection and induction (see Workplace Learning Guidelines*)   * Outline the process(es), including any specific criteria, for selecting and inducting an employer/workplace supervisor. * Identify the roles and responsibilities of the employer and workplace supervisor. * Identify key components of an employer/workplace supervisor induction program. * Clarify how students and visiting supervisors are to be identified in the workplace. * Liaise with employer to complete details of workplace learning placement, and explain insurance arrangements for workplace learning students. (See Appendix B2). * Once employer is selected, attach: * evidence that an induction process has been carried out; and * the completed Student Placement Record (Appendix B) and employer’s Certificate of Currency for Public Liability insurance (Note: For Department of Education or other State Government Department’s sites which are insured by RiskCover, a Certificate is not required. See Insurances for Workplace Learning Guidelines. | |
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| **PARENT/GUARDIAN CONSENT** | |
| *Obtain parental/guardian consent (see Appendix B and Workplace Learning Guidelines)*   * Detail the information to be provided to parent/guardian for their consent for their child to be accepted into a WPL program as part of their year’s curriculum program. * Provide parent with Insurance information for the placement, including Insurance Letter to Parents (Appendix D1 or Appendix D2). * Confirm that the parent sights Student Placement Record Appendices B1 and B2 and signs Student Placement Record Appendix B3. * In the case of SBA/Ts, the parent signature on the Training Contract will confirm their permission has been gained.   NOTE: Parents of Aboriginal students and parents of CALD students may require additional support in understanding communications and giving consent. | |
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| **RETAIN RECORDS** | |
| *Evidence/records are to be attached systematically to this Plan and retained until students reach 25 years old (see Workplace Learning Guidelines)*   * Establish a system for keeping records for each WPL Program operating, including for the Student Placement Record (Appendix B) for each work placement and the Certificate of Currency for the host employer’s public liability insurance. * For SBA/Ts, copies of the documentation identified in Appendix C should be retained. * Once WPL Program(s) are completed for the year, safely retain the records as per the Department of Education’s *Records Management* policy. | |
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| **EVALUATION** | |
| *Reviewing and evaluating the WPL program(s) and this Plan (see Workplace Learning Guidelines)*   * Outline the review and evaluation process to be carried out at least yearly. * Following the review(s), attach: * details of the review (date, those involved, outcomes, e.g. no change, specific changes, recommendations etc.); and * the revisions made to documents and/or processes. | |
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| ***Please sign the Workplace Learning Management Plan*** | |
| ***Workplace Learning Coordinator***  ***\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*** | ***Date***  ***\_\_\_\_\_\_\_\_\_\_\_\_\_\_*** |
| *I am satisfied that the management plan for this program meets Duty of Care for Public School Students Policy requirements. I approve the students named in the attachment to participate in this program.* | |
| ***Principal \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*** | ***Date***  ***\_\_\_\_\_\_\_\_\_\_\_\_\_\_*** |