

**Safety Management System**

for the Event

Click here to enter text.

hosted by

**Click here to enter text.**

on

**Click here to enter text.**

**Safety Management Plan**

**Description of event**

Information should be sufficient for sanctioning team to get a good understanding of the event.

**Include:**

* Location of Event   
  Click here to enter text.
* Type of water (flat / white water / open water / etc)  
  Click here to enter text.
* Description of Distances and courses offered   
  Click here to enter text.
* Other Considerations   
  Click here to enter text.

**Communication**

Give details of the method of communication between officials during the race.

Click here to enter text.

**First Aid**

Give details of the arrangements made for first aid.

Click here to enter text.

Nearest hospital / doctor.

Click here to enter text.

**Safety Boats**

Provide details of number, type and location of safety craft on the water*. – Suggested minimum is 1 power boat for every 50 participants and any one power boat to cover no more than 2.0 km radius on the course*

Click here to enter text.

**Queensland Canoeing race event Risk Assessment**

**Event:** Click here to enter text. **Location:** Click here to enter text. **Date:** Click here to enter text.

**Event Organisers:** Click here to enter text. **Contact:** Click here to enter text.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Venue** | **Risk** | **EXAMPLE ControlS** | **Action** | **Responsibility** |
| **Access to Vehicles** | Traffic incident and/or personal injury | Directions clearly sign posted  Reduced speed limit  Pedestrian crossing identified and sign posted  Other: (Please specify)  Click here to enter text. | Click here to enter text. | Click here to enter text. |
| **Parking** | Vehicle or equipment damage, personal injury or unauthorised parking | Clearly sign posted parking areas  Other: (Please specify)  Click here to enter text. | Click here to enter text. | Click here to enter text. |
| **Grounds** | * Personal injury * Protected fauna or flora disturbed/damaged | Inspect grounds identify hazards, remove and/or sign post  Advise competitors  Restrict access  Other: (Please specify)  Click here to enter text. | Click here to enter text. | Click here to enter text. |
| **Facilities** | Poor sanitary conditions | Toilets  Available fresh water | Click here to enter text. | Click here to enter text. |
| **Spectators/general public** | * Personal injury * Damage to equipment | Identify general public areas  Cordon off race areas  Officials/volunteers to advise spectators/general public of event and direct outside race areas  Other: (Please Specify)  Click here to enter text. | Click here to enter text. | Click here to enter text. |
| **Other water users** | * Personal injury * Collision * Damage to equipment | Club representative/official to advise other water users of event  Other: (Please Specify)  Click here to enter text. | Click here to enter text. | Click here to enter text. |
| **Weather** | **Risk** | **example Control** | **Action** | **Responsibilty** |
| **Unexpected adverse weather conditions** | * Damage to equipment * Inexperience competitors * Personal injury | *Identify and establish precaution strategies to include:*  High temperatures (xc)  High winds (speed)  Heavy rain (visibility)  Lightning (distance)  *Strategies should include at what point the event will be cancelled for each of the above and evacuation of competitors from the course.*  Other: (Please Specify)  Click here to enter text. | Click here to enter text. | Click here to enter text. |
| **Emergency** | **Risk** | **Control** |  | **RESPONSIBILTY** |
| **Emergency services required** | * Fatality or serious injury/incident * Incident with other water users | Identify and establish course emergency access points map  Advise local emergency services of the event and provide a copy of the course emergency access points map where necessary  Ensure emergency access points remain clear for the duration of the event  Advise applicable authorities of the event and seek approval for the event where necessary  Other: (Please Specify)  Click here to enter text. | Click here to enter text. | Click here to enter text. |
| **Event/Course Officials** | **Officials** | **Name** | | |
| **One person may function in one or more positions**  **\*not mandatory**  **#Competition Committee** | 1. Chief Official# 2. Technical Director# 3. Competition Secretary 4. Starter 5. Aligner (Start Marshall) 6. Course Umpire 7. Finishing Line Judge(s) 8. Timekeeper(s) 9. Boat Scrutineer 10. Raft Marshall 11. Safety Officer# 12. Announcer\* 13. Press Official\* | (a) Click here to enter text.  (b) Click here to enter text.  (c) Click here to enter text.  (d) Click here to enter text.  (e) Click here to enter text.  (f) Click here to enter text.  (g) Click here to enter text.  (h) Click here to enter text.  (i) Click here to enter text.  (j) Click here to enter text.  (k) Click here to enter text.  (l) Click here to enter text.  (m) Click here to enter text. | | |
| **Event** | **Risk** | **Control** | **ACTION** | **RESPONSIBILTY** |
| **Briefing** | * Unprepared competitor * Unsuitable craft * Potential to go off course during race * Unaware of requirements to competitor in need of assistance | Competitors advised of craft and personal requirements  Competitor advised of course directions and potential hazards and incorrect direction areas  Competitors advised of competition rules in providing assistance to other competitors  Competitors advised of their own personal responsibility as an competitor  Competitors advised of potential other water users and precautions  Other: (Please Specify)  Click here to enter text. | Click here to enter text. | Click here to enter text. |
| **Craft Scrutineering &Entry/Launch area** | * Personal injury * Overcrowding area * Craft/equipment damage | Inspect area – remove or make safe hazards  Designate and sign post launch area  All crafts to be scrutineered prior to race start  Sufficient number of officials/volunteers to manage competitors numbers  Officials competent in their role  Other: (Please Specify)  Click here to enter text. | Click here to enter text. | Click here to enter text. |
| **Warm-up/ cool down area** | * Personal injury * Collision with other craft/s * Collision/interference with racing competitors | Establish suitable area out of race line where possible  Advise competitors of warm-up/cool down areas and where required, craft paddling direction (eg clock or anticlock wise)  Rescue craft/s and competent persons on water  Other: (Please Specify)  Click here to enter text. | Click here to enter text. | Click here to enter text. |
| **Race Start/Finish** | * Personal injury * Craft capsize * Collision with other craft/s * High number of competitors (same race category) | Consider rolling start (rough conditions)  Consider splitting category and having two starts  Rescue craft and competent persons on water  Other: (Please Specify)  Click here to enter text. | Click here to enter text. | Click here to enter text. |
| **Race** | * Personal injury * Craft capsize * Collision with other craft/s | Sufficient number of rescue crafts and persons required for race  Rescue crafts and competent persons positioned at identified areas  Race officials position at key areas around course  Other: (Please Specify)  Click here to enter text. | Click here to enter text. | Click here to enter text. |
| **Post- race** | * Venue left in untidy state * Complaints from near venue residents | Leave venue in tidy state  Remove all associated event equipment and pick up all rubbish  Club representative to review and here necessary address complain/s  Other: (Please Specify)  Click here to enter text. | Click here to enter text. | Click here to enter text. |
| **BBQ** | * Food poisoning | Observe food safety and hygiene standards | Click here to enter text. | Click here to enter text. |
| **Incident Reports** | All reported incidents are to be investigated and recorded on the appropriate Qld Canoeing incident report form supplied | | |  |

**Emergency response procedure**

**Emergency contacts**

Chief Official – Click here to enter text.  
Technical Director – Click here to enter text.

Safety Officer – Click here to enter text.  
Local Police Station – Click here to enter text.  
Local Ambulance – Click here to enter text.

Local Fire and Rescue – Click here to enter text.

An emergency response may be necessary following (but not limited to) these situations:

* Adverse weather conditions (strong wind, lightening, extreme heat / cold)
* Dangerous animal sighting / attack (e.g. shark)
* Serious injury to competitor / volunteer
* Other (provide details):  
  Click here to enter text.

In the event of a race emergency evacuation being necessary the following protocol shall be implemented: (Review and modify the procedure to suit your event)

The identified hazard (emergency) shall be reported to the race Chief Official

The race Chief Official and designated race safety officer are responsible to call a race emergency evacuation

The designated safety officer shall take charge of race emergency evacuation

The designated safety officer shall advise by mobile phone all officials of the decision and contact the appropriate authorities of an enforced race emergency evacuation

Located race craft shall either (depending on emergency condition) be directed to the nearest safe exit for pick up (see map); instructed to port immediately or be assisted to a safe area by the safety craft.

Both the on and off water officials shall notify the designated safety officer of the race craft numbers and competitor names as they are secured

The designated safety officer shall arrange pick up assistance for competitors and craft who have disembarked at designated or non-designated race check points

Once all competitors, on and off water officials have been accounted for the emergency shall be cancelled

Other (Please Specify)

Click here to enter text.

**CONTINGENCY PLAN**

Please provide a contingency plan for adverse situations that may arise (e.g. adverse weather, change in water levels)

Click here to enter text.

**Accident/Incident Reporting**

In the event of an accident/incident the following procedures shall be implemented:

***Accident***

The official reporting the accident shall provide:

**Name of Person Reporting Accident**: Click here to enter text.

|  |  |  |
| --- | --- | --- |
| Date:  Click here to enter text. | Time of Accident:  Click here to enter text. | Number of people injured:  Click here to enter text. |
| Number of people injured:  Click here to enter text. | Name/s and contact details next of kin (if possible):  Click here to enter text. | Nature of Injuries:  Click here to enter text. |
| Assistance required?  Tick for “yes” | Location:  Click here to enter text. | Best Rout to location:  Click here to enter text. |
| Treatment being provided or recommended:  Click here to enter text. | Current Condition of Person/s:  Click here to enter text. | Witnesses names and contact details:  Click here to enter text. |
| Summary of Accident:  Click here to enter text. | | |

***Incident***

The official reporting the accident shall provide:

**Name of Person Reporting Incident**: Click here to enter text.

|  |  |  |  |
| --- | --- | --- | --- |
| Date of Incident:  Click here to enter text. | | Time of Incident:  Click here to enter text. | |
| Nature of Incident:  Click here to enter text. | Person/s involved (names and contact details):  Click here to enter text. | | Location of Incident:  Click here to enter text. |
| Witnesses names and contact details:  Click here to enter text. | Damege (if any):  Click here to enter text. | | Assistance (if required):  Click here to enter text. |
| Summary of the incident:  Click here to enter text. | | | |