

# Event Health & Safety Plan and Risk Analysis Management

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|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------|-----------------------------------------|--|
| <b>Event Organiser:</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | WBOP Secondary Schools Athletics Association        |                                         |  |
| <b>Event Name:</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | WBOP Secondary School Cross Country Championships   |                                         |  |
| <b>Postal Address:</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | <b>Physical Address (if differs from Postal):</b>   |                                         |  |
| PO Box 46<br>Hamilton 3240                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                                     |                                         |  |
| <b>Contact Number:</b> 0211940600                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | <b>Email:</b><br>administrator@athleticswbop.org.nz |                                         |  |
| <b>Description of Event:</b><br>The WBOP Cross Country Championship is one day event held on 7 August (postponement date 14 August) at Waipuna Park, Tauranga. The event attracts an estimated 300 participants plus additional supporters.<br>The championship features six individual races where athletes representing their schools in three age groups Y9, Junior U16, and Senior U20. Male Para Athletes are included in Junior Boys event and Female Para Athletes in the Senior Girls event. |                                                     |                                         |  |
| <b>Location of event:</b> Waipuna Park, Tauranga                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                     |                                         |  |
| <b>Start date:</b> Thursday 7 August                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                                     | <b>Finish date:</b> Thursday 7 August   |  |
| <b>Pack in date:</b> Thursday 7 August                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                     | <b>Pack Out date:</b> Thursday 7 August |  |
| <b>Anticipated Participants:</b> 300                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                                     | <b>Anticipated Spectators:</b> 100      |  |
| <b>Person in Charge of Event:</b> John Tylden – Event Director                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                     |                                         |  |
| <b>Event Secretary and Administrator:</b> Dianne Rodger – Athletics Waikato-Bay of Plenty                                                                                                                                                                                                                                                                                                                                                                                                            |                                                     |                                         |  |
| <b>Risk Assessment completed by:</b> John Tylden                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                     | <b>Contact number:</b> 0272645030       |  |

**Event Director and Site Supervisor:** John Tylden

Mobile: 0272645030

**Event Secretary:** Dianne Rodger

Mobile: 0211940600

## Emergency Procedures

### Incident Command System

All incidents must be reported to the Event Director – John Tylden who will then cascade all information onto the required personal. In the event the Event director cannot be located for notification of a major incident or emergency, please use the flow chart listed below.

John Tylden >>> Dianne Rodger

### Emergency Procedure

Any accidents/ incidents and near misses will be recorded on the official forms supplied by WBOPSSAA. These will be available and kept in the TIC tent at the finish area.

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## Evacuation Procedure

Evacuation may be required immediately in situations such as severe weather, fires, and earthquake or bomb threats or in coordination with community emergency response efforts for cyclones or approaching storms. The type of emergency will determine the evacuation procedure. All announcements shall be made via the PA system as to the best course of action to take. If the PA system is not operational, event organisers will directly communicate with event attendees. Depending on the emergency the race organisers may act under instruction from the Police, Fire Service or Civil Defence. Should representatives from these organisations arrive on site they may assume responsibility for communication and evacuation procedures.

### *Sheltering:*

Depending upon the type of incident, sheltering inside adjacent facilities (or parts of these facilities) may be the most appropriate protective action. Should this be required, all will be notified via the PA system and directed to follow procedures and report to their designated shelter areas within the facility.

*Earthquake Response:* Employ the Drop, Cover, Hold method. Try to find shelter away from buildings, trees and other things that could fall. After shaking has stopped head towards the start/finish area and await instructions over the PA system.

*De-Activation:* When emergency conditions have dissipated or stabilized, and normal operations have resumed, a formal announcement will be disseminated via the audio system.

## Medical Support

Qualified first aiders will be either be onsite or on call if necessary. Schools are also advised to bring their own first response first aid including ice for minor injuries

The nearest Medical Centre is **Tauranga Hospital ED 829 Cameron Rd**

## Weather Policy

If the weather is not conducive to running the championship in a safety conscious manner the event will be temporarily suspended at the discretion of the Event Director and Local Organizing Committee. The decision to proceed, alter or cancel the event will be referred to the Event Director and Local Organizing Committee.

## Media Policy

Nobody connected with the Event is authorised to speak to the media without the express permission of the Event Director. Volunteers are notified of this policy during briefing. Any unauthorised release of photographs or statements is absolutely forbidden. Following a major incident, the Event Director will create a Press Release and speak to media as appropriate. This will only take place after they have all of the information about the incident and have had time to digest it and develop a well-balanced response on behalf of the event.

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|                                                                                          |                                                    |                                                                                                                                                                                                         |                         |                               |
|------------------------------------------------------------------------------------------|----------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------|-------------------------------|
| <b>Name of Event:</b> WBOPSSAA Cross Country Championships                               |                                                    |                                                                                                                                                                                                         |                         |                               |
| <b>Date of Event</b>                                                                     | 7 August 2025                                      |                                                                                                                                                                                                         | <b>Site Supervisor:</b> |                               |
| <b>Location of Event:</b>                                                                | Waipuna Park, Tauranga                             |                                                                                                                                                                                                         | John Tylden             |                               |
| <b>Hazards</b>                                                                           | <b>Persons Affected</b>                            | <b>Control / Actions</b>                                                                                                                                                                                | <b>Risk</b>             | <b>Responsibility</b>         |
| <b>EQUIPMENT</b>                                                                         |                                                    |                                                                                                                                                                                                         |                         |                               |
| Erection of temporary structures causes an injury to contractor or member of the public. | Contractor<br>Athletes<br>Volunteers<br>Spectators | Isolate the hazard by cordoning off the area. Site supervisor/s to monitor the area and ensure that the public are not entering the work space.                                                         | MOD                     | Contractor<br>Site Supervisor |
| Temporary infrastructure blows away and causes injury to person or equipment             | Athletes<br>Volunteers<br>Spectators               | Ensure that all Temporary infrastructures are adequately secured. Monitor weather conditions prior to and during the event.                                                                             | MOD                     | Contractor<br>Site Supervisor |
| Electricity cables/wires causing injury or trip/fall.                                    | Athletes<br>Volunteers<br>Spectators               | Cables covers used where needed and cables to be placed out of way of foot traffic.                                                                                                                     | MOD                     | Contractor<br>Site Supervisor |
| <b>ENVIRONMENT</b>                                                                       |                                                    |                                                                                                                                                                                                         |                         |                               |
| Ground conditions                                                                        | Athletes<br>Volunteers                             | Marshalls to inspect the ground prior to event starting and confirm with Event director that the fields /course is safe for running.                                                                    | LOW                     | Site Supervisor               |
| Hard or sharp objects on the field causing injury                                        | Athletes<br>Volunteers                             | Marshalls to inspect the course prior to event starting and confirm with tournament director that the fields /course is safe for running.                                                               | LOW                     | Site Supervisor               |
| Litter on site                                                                           | Athletes<br>Spectators<br>Volunteers               | Adequate number of provided bins - plastic & aluminium recycling bins & general rubbish bins. Volunteers and staff briefed to keep venue litter free on PA system                                       | LOW                     | Site Supervisor               |
| Weather<br>Cold/wet/icy conditions                                                       | Athletes<br>Spectators<br>Volunteers               | Awareness of appropriate clothing for weather conditions is worn. Temporary shelter provided in the form of marquees. Water provided.                                                                   | HIGH                    | Site Supervisor               |
| <b>PEOPLE</b>                                                                            |                                                    |                                                                                                                                                                                                         |                         |                               |
| Interference with Athletes/ Competitors during competition                               | Athletes<br>Spectators<br>Volunteers               | Course clearly marked with flags and barrier tape. Spectators provided with specific places to cross course. Use of PA system and Marshals for ongoing awareness/ enforcement.                          | LOW                     | Site Supervisor               |
| Medical Emergency                                                                        | Athletes<br>Spectators<br>Volunteers               | On site briefing given to all team managers with clarity of nearest medical centre and details for emergency calls.<br><br>Knowledge of location of Ngatea Medical Centre<br>Emergency numbers to call. | MOD                     | Site Supervisor               |
| Moving Vehicles                                                                          | Athletes<br>Spectators<br>Volunteers               | Control areas where vehicles will be moving and use warning signage. Speed restricted to 10km close to the venue. Signs put up prior to start of event as required. E.g. Parking Signs                  | MOD                     | Site Supervisor               |

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|                       |                                      |                                                                                                                                                                                                                                                                                                            |     |                 |
|-----------------------|--------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|-----------------|
| Aggression from crowd | Athletes<br>Spectators<br>Volunteers | On the rare occasions that the crowd are aggressive they are to be kept away from the edge of the course area. Failure to follow instructions would lead to call to Police who will take control of the situation.                                                                                         | LOW | Site Supervisor |
| Lost Children         | Child/Parent                         | Announcements will be made informing spectators to contact the Event Director if they have become separated from their parents or child. Lost child to stay with officials until the parent is located. If this proves unsuccessful a missing person report will be completed and police will be notified. | LOW | Site Supervisor |

**For your convenience we have included the following documents:**

- Incident report – *The event director and any affected team will have their team manager complete an incident report for all major incidents and provide a copy to Athletics Waikato-Bay of Plenty within 48 hours.*

# Event Health & Safety Plan and Risk Analysis Management

|                                               |                                                                  |                          |                                                  |                                               |
|-----------------------------------------------|------------------------------------------------------------------|--------------------------|--------------------------------------------------|-----------------------------------------------|
| <b>Injured Person Name:</b><br>.....<br>..... | <b>DOB:</b><br>.....<br><b>Male / Female</b><br><b>Ph:</b> ..... | <b>Address:</b><br>..... | <b>Injury location:</b><br>eg head, arm,<br>body | <b>Injury Type:</b><br>eg cut, burn, abrasion |
|-----------------------------------------------|------------------------------------------------------------------|--------------------------|--------------------------------------------------|-----------------------------------------------|

|                                                     |                                                                                                            |                                                                                                                                                       |                |
|-----------------------------------------------------|------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------|----------------|
| Type of incident:                                   |                                                                                                            | <input type="checkbox"/> Injury <input type="checkbox"/> Incident <input type="checkbox"/> At Risk Behaviour <input type="checkbox"/> Illness         |                |
| Category:                                           |                                                                                                            | <input type="checkbox"/> Minor Harm <input type="checkbox"/> Serious Harm <input type="checkbox"/> Fatality <input type="checkbox"/> Vehicle involved |                |
| Severity Level:                                     |                                                                                                            | 3 = High    2 = Medium    1 = <i>(please circle)</i><br>Low                                                                                           |                |
| Reported by:                                        | <input type="checkbox"/> Employee <input type="checkbox"/> Contractor <input type="checkbox"/> Third Party |                                                                                                                                                       | Date reported: |
|                                                     | Name:                                                                                                      |                                                                                                                                                       | Position:      |
| <b>Location &amp; Time of Incident</b>              |                                                                                                            | <b>Incident Description</b>                                                                                                                           |                |
| <input type="checkbox"/> Incident happened off site |                                                                                                            |                                                                                                                                                       |                |
| Department                                          |                                                                                                            |                                                                                                                                                       |                |
| Location                                            |                                                                                                            |                                                                                                                                                       |                |
| Position                                            |                                                                                                            |                                                                                                                                                       |                |
| Supervisor                                          |                                                                                                            |                                                                                                                                                       |                |
| Incident Date                                       |                                                                                                            |                                                                                                                                                       |                |
| Incident Time                                       |                                                                                                            |                                                                                                                                                       |                |
| Started work Time                                   |                                                                                                            |                                                                                                                                                       |                |

|                                   |
|-----------------------------------|
| <b><u>Injury Description:</u></b> |
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|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------|
| <b>Treatment:</b><br><input type="checkbox"/> No Treatment<br><input type="checkbox"/> First Aid<br><input type="checkbox"/> Medical Treatment<br><input type="checkbox"/> Hospitalisation | <b>Medical Condition:</b><br><input type="checkbox"/> Fully Fit<br><input type="checkbox"/> Restricted Duties<br><input type="checkbox"/> Other | <b>Days Off:</b><br><input type="checkbox"/> Lost Time Injury _____ days off |
| <b>Office Use Only</b><br><b>Entered in Vault</b> Yes/No                                                                                                                                   |                                                                                                                                                 |                                                                              |

# Event Health & Safety Plan and Risk Analysis Management

## Serious Harm Procedure

Manager/Supervisor/Health & Safety Advisor to Contact WorkSafe NZ

Phone **0800 030 040**

Date reported to WorkSafe: \_\_\_\_/\_\_\_\_/\_\_\_\_

Reported to WorkSafe by:

Name:

WorkSafe representative name:

Name:

Scene Held: Y/N (circle one)

Scene Released: Y/N

Date:

Time:

Scene Released by who:

(WorkSafe, NZ Police, NZ Fire etc.)

Name:

## Hazard Management Process

Hazard related to accident/incident:

E.g. "Slide" AC Baths:

Analysis/cause of accident/incident:

Initial investigation by:

Name:

Investigation date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Requires more investigation: Y/N..(circle one)

ID safety equipment used:

Did safety equipment fail: Y/N (circle one)

Equipment/machinery involved:

Preventative action required: Y/N (circle one)

Action taken date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Action taken by: (Name).....

Completed by:..... Signature:..... Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Sighted by

Head of Department: (Name)..... Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Copied to (✓):

H&S Advisor

H&S Rep

Supervisor

Other: