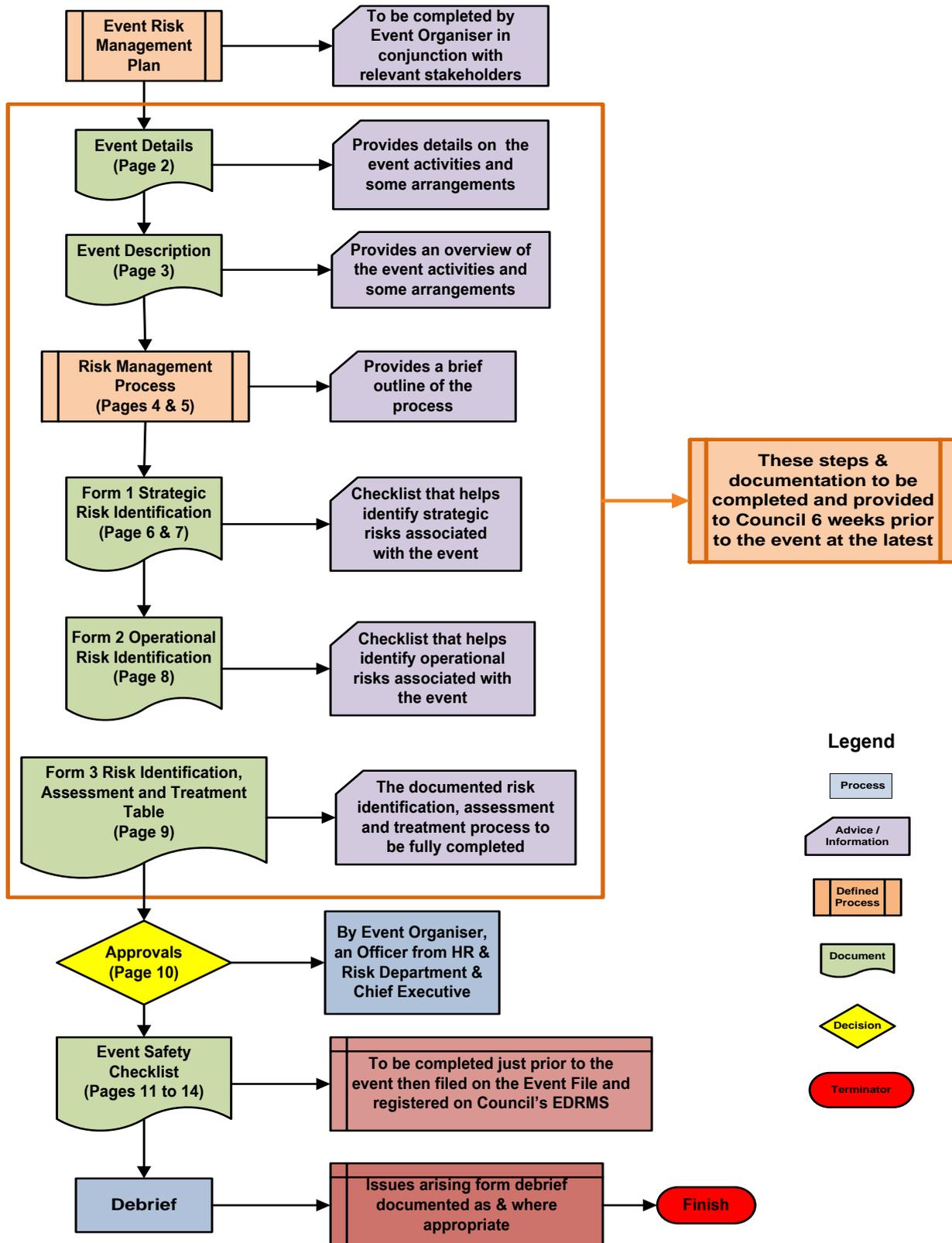


Event Risk Management Plan

This Event Risk Management Plan is designed to assist event organisers plan and document their event. This plan also provides information about the event, the identification assessment and management of risks associated with the operation for the event to Council for the event approval process. The diagram below provides an overview of the event risk management process.





Event Risk Management Plan

Event Details

Event name:	
Event date and time:	
Location of Event:	
Event Organiser:	
Type of Event:	
Expected attendance:	
Will the Event be run in conjunction with other Event/s at the same time?	Yes / No - If yes specify other Events
Name of person completing this Plan and contact details:	
Site Plan / drawings provided (Attach copy):	
Event Safety Officer/s and contact details:	
Number of volunteers participating	
Public Liability Insurance - Provider, Policy Number, expiry date and value (attach copy of Policy)	

Event Stakeholders – Please tick appropriate stakeholders

<input type="checkbox"/> Organisers	<input type="checkbox"/> Emergency Services
<input type="checkbox"/> Volunteers	<input type="checkbox"/> Students
<input type="checkbox"/> Council (in general)	<input type="checkbox"/> Contracted service providers
<input type="checkbox"/> Section 41 Committee	<input type="checkbox"/> Security
<input type="checkbox"/> Council Staff	<input type="checkbox"/> Transport
<input type="checkbox"/> Incorporated Body	<input type="checkbox"/> Sponsors /funding bodies
<input type="checkbox"/> Local Business/s	<input type="checkbox"/> Public
<input type="checkbox"/> Facility(Owner) Office	<input type="checkbox"/> Other
<input type="checkbox"/> Media	

Event Planning Committee – List Committee Members

Member's Name	Position	Contact Number



Event Description - provide information on the following;

Describe the main purpose of the Event:

Describe the types of activities which will be conducted at the Event:

Describe the expected type and number of participants: e.g. stall holders, exhibitions, performers.

NOTE: Please complete Temporary Food Notification Form – appendix 2

Describe the assets/facilities/equipment that will be used: e.g. marquees/tents, staging, seating, PA.

Approvals, Licences and Permits required: e.g. event approvals, liquor, fireworks, Council permits, temporary road closure.

If this event is run in conjunction with another event/s being held on the same day / time, describe the interaction / interface with other event/s:

Contingency Plans: e.g. adverse weather, power failure, facility/ equipment failure

Describe the parking arrangements:

Describe waste management: e.g. catering refuse, toilets

Describe participant wellbeing management including facilities and infrastructure e.g. sunscreen, water, shelter, seating, etc.

Describe staff / volunteer wellbeing management: including facilities and infrastructure e.g. sunscreen, water, shelter, seating etc.

Risk Management

Introduction

The _____ event is committed to the management of risk to enhance the event image, reputation and success. To achieve this a risk management approach will be undertaken by event organiser/s to meet service delivery, environmental, asset, intellectual property, contractual & statutory obligations, and to protect stakeholders, organisers, participants, facilities, others.

The purpose of this document is to provide a process for ensuring that Risk Management is considered and included in the operations of the event, and to provide guidelines for its implementation.

Context and Background

Risk Management is usually defined as an assessment of the possibility of some adverse occurrence and the likely consequences of this occurrence. Risk is inherent in the functions and activities of the event. A consequence of an adverse occurrence during the event may include an inability to meet stakeholder requirements, financial loss, organisational or political embarrassment, operational disruption, legal problems, and so forth. It is important that risk management practices are in place to minimise the event's exposure to risk.

Risk Management involves adopting and applying a systematic process to identify, analyse, assess, control and monitor risk so that it is reduced and maintained within an acceptable level. Risk management is a tool and a part of "good management" and good planning processes.

Risk Management Process

Risk Management Structure and Responsibilities

The event organiser/s are responsible for managing risk within their span of control, for promoting the application of risk management by contractors, staff and volunteers, and assisting with the identification of strategic and operational risks that could impact on the event as a whole. Where a high or extreme risk is identified event organiser/s, that risk is reported to Alexandrina Council prior to approval being sought for the event.

Risk Identification, Assessment and Treatment

The event organiser/s is to undertake an identification, assessment and treatment of strategic and operational risks associated with the event. Risk Treatment Plans will need to be reviewed prior to the event commencing.

It should be ensured that the following steps are undertaken for an event:

1. Identify reasonably foreseeable strategic and operational risks for the event using Forms 1 and 2
2. List the details of all identified risks/hazards on Form 3, on page 10 (Risk Identification, Assessment and Treatment Table column 2)
3. Use form 4 Event Risk Matrix on page 11 to assess the likelihood and consequence of each risk (transfer to form 3, columns 3 and 4).
4. Use form 4 Event Risk Matrix on page 11 to apply a risk rating (Form 3, Column 5).
5. Risk Treatment; identify what action needs to be taken. (Form 3, Column 6).
6. Allocate the action to a person responsible. (Form 3, Column 7).
7. Allocate a timeframe for completion. (Form 3, Column 8).
8. Record the status of the treatment/s up to completion. (Form 3, Column 9).

By following these steps from initial identification of risks through to completion of treatment plans it is ensured that risks are managed. Importantly, all event organisers and key stakeholders should be involved in the



identification, assessment and treatment process. It should be appropriately communicated with all key stakeholders.

Reference(s):

Alexandrina Council's Risk Management Policy
Alexandrina Council's Risk Management Procedure
ISO 31000:2009 Risk Management – Principles & guidelines
Work Health Safety Act and Regulation 2012
SafeWork SA Event Safety documents
Local Government Act 1999



FORM 2 - Operational Risk Identification

Use the following chart to identify any operational hazards associated with the event. If the prompt is applicable tick 'Yes' then transfer the identified risk to Form 3 Risk Identification, Assessment and Treatment Table on page 9. If the prompt is not applicable tick 'No'. If the prompt does not apply tick 'N/A'.

Code	A. Explosion – Due to...	Yes	No	N/A
A1	Detonation of explosive materials			
A2	Bleve (Boiling Liquid Expanding Vapour Explosion)			
A3	Overpressure of vessel or tank			
A4	Dust explosion			
A5	Ignition of flammable or explosive vapours			
A6	Chemical reaction			
Code	B. Personal Injury/Illness or Death – Due to...	Yes	No	N/A
B1	Access or egress from site / workarea			
B2	Asbestos / lead			
B3	Biological (Exposure to infection / infectious diseases)			
B4	Chemical exposure (use and handling, spill or leak)			
B5	Confined Spaces			
B6	Drowning			
B7	Dust / Particles			
B8	Electrocution/electric shock			
B9	Ergonomics (eg workstation, equipment controls)			
B10	Falling from the same level (eg falling over on the same level)			
B11	Falling from height (eg falling from one level to another)			
B12	Falling objects (eg from same level or above)			
B13	Insect / animal bites and/or stings			
B14	Laceration from sharp or rough edges / objects / materials			
B15	Manual handling (lifting, bending, twisting, repetitive, cramped, awkward, heavy)			
B16	Noise (eg machinery)			
B17	Overhead hazards (power lines, scaffold, equipment, works)			
B19	Poor lighting			
B20	Plant and equipment (entanglement, crush, cut, stab, puncture, shear, burn, strike, struck by moving machinery / mobile plant)			
B21	Remote or isolated work locations			
B22	Suffocation by gas, fumes, lack of oxygen (exposure to toxic chemical vapours, exposure to toxic combustion products, exposure to toxic chemical reaction gases)			
B23	Slipping (eg on loose or wet or slippery surface)			
B24	Traffic / Pedestrians (WZTM)			
B25	Tripping (eg over an object)			
B26	Trenching / Excavations			
B27	Uneven surface (eg gradient)			
B28	Vibration (eg machinery)			
B29	Working over a pit / hole			
B30	Weather conditions (wind, rain, UV Radiation, visibility)			
B31	Other hazards identified - specify			

Code	C. Fire – Resulting from the activity	Yes	No	N/A
C1	Ignition source in hazardous area (Naked flame, sparks, welding)			
C2	Generation of static discharge			
C3	Ignition of flammable vapours			
C4	Decomposition reaction			
C5	Runaway uncontrolled chemical reaction			
C6	Reaction of incompatible materials			
C7	Other – specify:			
Code	D. Property Damage – Resulting from the activity	Yes	No	N/A
D1	Vehicle impact (truck, car forklift)			
D2	Vandalism			
D3	Corrosion failure			
D4	Fatigue failure			
D5	Structural failure			
D6	Lifting equipment failure			
D7	Pressure vessel failure			
D8	Flood			
D9	Underground services			
D9	Other – specify:			
Code	E. Environmental Damage – Resulting from the activity	Yes	No	N/A
E1	Release into waterways			
E2	Release into sewerage system			
E3	Release to groundwater			
E4	Release to soil			
E5	Firewater runoff			
E6	Flora and/or fauna damage			
E7	Environmental noise			
E8	Release of toxic gas/vapour			
E9	Odour release off-site			
E10	Visual air pollution			
E11	Other – specify:			
Code	F. Other	Yes	No	N/A
F1	Loss of power and services			
F2	Adverse publicity			
F3	Loss of business			
F4	Reduced security			
F5	Other – specify:			

Transfer any identified operational hazards to Form 3 Risk Identification, Assessment and Treatment Table in the following section (page 10)



FORM 4 - Event Risk Matrix – Use this matrix to calculate risk ratings used in form 3 (page 10)

Table 1 Consequence Rating - Qualitative measures of consequence or impact

Rating	Descriptor	Explanation
1	Insignificant	Negligible financial loss (< \$200 or 5% of event budget). No real disruption to event. No injury or first aid only. No impact on morale. No media or political attention. Some local complaints. No breach of legislation. Minor instance of environmental damage. Can be reversed immediately. Interruption to a event – minimal impact to participants / store holders / others.
2	Minor	Minor financial loss (\$200 – \$500 or 5 - 10% of event budget) Minor financial disruption. Minor variation to budget. Minor medical attention. Negligible impact on morale. Some local media or political attention. Minor Community concern. Below 5% of community affected. Minor breach of legislation. Minor impact to environment. Can be reversed in a short timeframe. Minor interruption to event with minor impact to participants / store holders / others.
3	Moderate	Moderate financial loss (\$500 - \$1500 or 10 - 25% of event budget). Moderate impact to event operations. Moderate variation to budget. Significant injury requiring medical attention. Short term effect on morale. Significant media attention and public interest. Potential for adverse local media attention. 5 – 40% of Community affected. Breach of legislation with penalties. Moderate impact to environment. Localised damage that has potential to spread and reversed with intensive efforts. Moderate interruption to event. Partial Event Emergency Plan action may be needed.
4	Significant	Major financial loss (\$1500k - \$3000k or 25 - 50% of event budget) Major impact on event operations. Major variation to budget requiring additional funding for event and post event investigations/actions. Serious long term injury. Temporary disablement. Significant impact on morale and business. Significant adverse media coverage and public interest. Long term effect on reputation. 40 - 70% of Community affected. Multiple breaches of legislation with penalties. Severe loss of environmental amenity, Danger of continuing environmental damage. Major interruption to service delivery, Full or partial Event Emergency Plan action may be needed.
5	Catastrophic	Significant financial loss (> \$3000k or >50% of event budget). Ceasing event operation. Significant financial impact during & post event, major injury/disablement or death. Long term effect on morale and future staging of the event. Adverse national media attention. Major embarrassment attention. Major breaches of legislation with max penalties. Major loss of environmental amenity – irrecoverable environmental damage. Full Event Emergency Plan action required.

Table 2 Likelihood Rating - Qualitative measures of likelihood

Rating	Descriptor	Explanation
A	Almost certain	Expected to occur at times of normal operations (more than once per year), 95% chance
B	Likely	Will occur at some stage based on previous incidents or in most circumstances (1-2 years), 75% to 95% chance
C	Possible	Not expected to occur but could under specific circumstances. Might Occur (2-5 years), 25% to 75% chance
D	Unlikely	Conceivable but not likely to occur under normal operations – has occurred at some time (5-10 years), 5% to 25% chance
E	Rare	Only occurs in exceptional circumstances (>10 years), < 5% chance

Table 3 Risk Rating - Qualitative risk analysis matrix

Likelihood		Consequence				
		Insignificant 1	Minor 2	Moderate 3	Significant 4	Catastrophic 5
A Almost certain	5	Moderate	Moderate	High	Extreme	Extreme
B Likely	4	Moderate	Moderate	High	High	Extreme
C Possible	3	Low	Moderate	Moderate	High	High
D Unlikely	2	Low	Low	Moderate	Moderate	High
E Rare	1	Low	Low	Moderate	Moderate	High

Legend

- E - Extreme risk:** Activity not to take place without Council approval.
- H - High risks:** Event Planning Committee with risk controls specified and implemented immediately, Council to be notified.
- M - Moderate risk:** Event Planning Committee responsibility with risk controls specified and implemented in defined timeframes.
- L - Low risk:** Manage by routine procedures.

RISK CONTROL - HIERARCHY OF CONTROLS

The objective is to eliminate or minimise the risk. The categories below are the required control options to be applied in descending order.

- 1 **ELIMINATION** - Complete removal of the risk of exposure to the risk eg remove the problem/process.
- 2 **SUBSTITUTION** - Involves replacing the plant, equipment, substance or work process with one with less risks.
- 3 **ENGINEERING CONTROLS** - May include: barriers, redesigning/re-engineering the workplace, fixing guards, or maintenance to minimise exposure to risks.
- 4 **ADMINISTRATION CONTROLS** - May include: introducing new work practices, policies, placing signs, training and operating procedures.



CRITICAL CHECKLIST - to be completed no later than six weeks prior to the event.
Please ensure you have addressed the following;

- I have read Councils and [Events Alexandrina Festivals and Events A – Z Information Kit](#)
- Evidence of current Public Liability Insurance attached (minimum \$10 000 000)
- Site plan of the event area and all associated infrastructure attached
- Retained the event safety checklist for filling in on event day (appendix 1)
- Temporary Food Notification form (appendix 2) completed and attached
- I have signed the document

INSERT NAME

Person responsible for Risk Management Plan/ Event Organiser

INSERT NAME OF ORGANISATION

Signature

Date

The risk management plan for this activity is recommended / not recommended with the following comments:

Approvals

INSERT TITLE

Governance and Strategy Department/Human Resources Department
Organisational Development Division

Signature

Date

Approved / not approved with the following comments:

Completed plan to be registered on Council's EDRMS by Council's Events Coordinator - Record No



APPENDIX 1 - On day event safety checklist

Use this form on the event day/evening of the event to assist in risk assessment.

This checklist **must** be completed immediately prior to the opening of the event, issues are to be addressed immediately, then the completed checklist placed on the event file.

Event name: _____ Event date: _____

ACCESS and EGRESS	Comments (if any)
<input type="checkbox"/> Entry and exit areas are clear and easily accessible for staff and expected crowd numbers <input type="checkbox"/> Entry and exit areas are adequate for emergency exit and emergency services <input type="checkbox"/> Thoroughfares are well defined and clearly marked	
TRAFFIC FLOW	Comments (if any)
<input type="checkbox"/> Clearly defined areas for traffic which are separated from pedestrian areas <input type="checkbox"/> Provisions for safe passage of emergency and other vehicles through pedestrian traffic <input type="checkbox"/> Controlled traffic flow and adequate signage for directions	
AMENITIES	Comments (if any)
<input type="checkbox"/> Adequate provision of toilets, and toilet supplies, ie, paper, soap etc and hand washing facilities <input type="checkbox"/> Access toilet <input type="checkbox"/> Availability of clean fresh water for both staff and attendees <input type="checkbox"/> Adequate catering facilities, including clean up and food preparation areas (if relevant) <input type="checkbox"/> Provide appropriate type, quantity and location of waste receptacles, bins, skips etc –as marked on a site plan. <input type="checkbox"/> Organised waste disposal and removal of waste receptacles	
SIGNAGE	Comments (if any)
<input type="checkbox"/> Adequate signage for entries, exits, toilet facilities etc. <input type="checkbox"/> Signs placed appropriately and adequately secured <input type="checkbox"/> Signage for any hazardous areas or substances <input type="checkbox"/> Clearly signed first aid and fire extinguisher locations	
MAINTENANCE	Comments (if any)
<input type="checkbox"/> Qualified and competent maintenance personnel available to undertake repairs required <input type="checkbox"/> Maintenance personnel have a contact person (e.g. event co-ordinator) and means of communicating with them <input type="checkbox"/> Records of any maintenance undertaken kept for future reference and reporting	
FIRE PREVENTION	Comments (if any)
<input type="checkbox"/> Suitable fire extinguishers (e.g. CO2, water, chemical) and blankets are in appropriate areas, tested and in date <input type="checkbox"/> Personnel are trained in extinguisher and blanket use <input type="checkbox"/> Ignition source areas are kept clear at all times and easily accessible	
EMERGENCY PROCEDURES Responsible Person _____	Comments (if any)
<input type="checkbox"/> Emergency response plan and control procedures in place <input type="checkbox"/> Emergency response team trained to carry out plan <input type="checkbox"/> Current site maps available to all staff, emergency services and other relevant parties	



<input type="checkbox"/> Hazard Incident Accident Reporting forms / process in place <input type="checkbox"/> Spills Kit (waterway and land)	
FIRST AID	Comments (if any)
<input type="checkbox"/> First aid stations are suitably located, clearly signed and easily accessible with facilities adequate for the type of event being held <input type="checkbox"/> Qualified First Aid personnel are assigned and present <input type="checkbox"/> Good means of communication provided between event personnel and first aid stations	
STAFF, VOLUNTEER and CONTRACTOR TRAINING	Comments (if any)
<input type="checkbox"/> Staff and volunteers are adequately inducted and trained about the event (site specific) <input type="checkbox"/> Copies of applications, memos and any training records are kept by the event coordinator <input type="checkbox"/> Contractors are on Councils Contractors Register (requirement for Council events only) <input type="checkbox"/> Contractors are given a relevant, site specific induction regarding the event <input type="checkbox"/> Contractors have been given local induction for the event	
ELECTRICAL	Comments (if any)
<input type="checkbox"/> All portable electrical equipment, including leads, are tested, tagged and in date <input type="checkbox"/> Adequate protection of the public from electric shock and any trip hazards from cords <input type="checkbox"/> All leads, plugs, etc. are protected from weather and other environmental conditions (e.g. water) <input type="checkbox"/> Evidence of electrical safety can be provided upon request from an authorised person (e.g. tagging or documentation) <input type="checkbox"/> Emergency contact for after hours	
LIGHTING	Comments (if any)
<input type="checkbox"/> Adequate natural or artificial lighting provided for setting up, conducting and dismantling event <input type="checkbox"/> Portable lighting is tested and in date <input type="checkbox"/> Suitable emergency lighting is available	
MANUAL HANDLING	Comments (if any)
<input type="checkbox"/> All staff and volunteers are trained to assess each task and use safe technique when lifting <input type="checkbox"/> Loads are delivered as close as possible to area using vehicle or mechanical aid (e.g. trolleys, sack trucks) <input type="checkbox"/> Light, small loads and physical aids (assistance from second person or team lift where needed) are used	
AMUSEMENT STRUCTURES (INCLUDING INFLATABLE STRUCTURES)	Comments (if any)
<input type="checkbox"/> Amusements structures must not be used or operated unless a current certificate of registration issued by SafeWork SA can be provided. Interstate registrations are not acceptable in South Australia <input type="checkbox"/> All structures must have current certificate of inspection issued by a professional engineer and qualified electrician <input type="checkbox"/> Appropriate space and suitable ground surface is allocated for each ride, including access and egress for patrons <input type="checkbox"/> There is appropriate fencing surrounding rides <input type="checkbox"/> There is appropriate soft-fall area for inflatable structures	

INFLATABLE STRUCTURES (IN ADDITION TO THE ABOVE REQUIREMENTS)	Comments (if any)
<ul style="list-style-type: none"> <input type="checkbox"/> A thorough check of the inflatable structure and accessories is carried out prior to use (ensuring all anchor points, ropes and stakes or ballast are undamaged and fit for continual use) <input type="checkbox"/> All tie down ropes attached to the device are fastened to adequate anchorages and there is adequate soft-fall area and appropriate fencing <input type="checkbox"/> Operator monitors prevailing wind conditions 	
LIQUID PETROLEUM GAS (LPG) CYLINDERS AND HEATERS, GAS BARBEQUES	Comments (if any)
<ul style="list-style-type: none"> <input type="checkbox"/> Small gas cylinders used wherever possible. Cylinders over nine kilograms should be hard plumbed, stored outside and fitted by a licensed gas fitter <input type="checkbox"/> LPG cylinders are secured to increase stability <input type="checkbox"/> LPG cylinders are clear of ignition sources and are in a well ventilated area in accordance with AS/NZS 1596:2008 – the storage and handling of LP Gas <input type="checkbox"/> All LPG cylinders are checked to ensure they do not exceed 10 years of the stamped test date <input type="checkbox"/> Compliance with AS/NZS 1596:2008 – the storage and handling of LP Gas <input type="checkbox"/> A licence is held if keeping over 250 kilograms of LPG in cylinders or tanks 	
WEATHER CONDITIONS	Comments (if any)
<ul style="list-style-type: none"> <input type="checkbox"/> Use current Australian Bureau of Meteorology information to ascertain weather conditions <input type="checkbox"/> Weather conditions planned for and monitored e.g. partitions, displays and signage well secured for windy conditions, non slip mats for wet conditions, and shade, sunscreen and water provisions for heat <input type="checkbox"/> Wind speeds are monitored and amusement structure operation ceased in accordance with manufacturer's specifications (inflatable structures must cease operation when wind speed reaches 40 km per hour) 	
PERSONAL PROTECTIVE EQUIPMENT (PPE)	Comments (if any)
<ul style="list-style-type: none"> <input type="checkbox"/> All tasks undertaken by staff and volunteers are checked for the Personal Protective Equipment (PPE) required <input type="checkbox"/> PPE provided if needed (e.g. gloves, aprons, earplugs etc.) and in good condition and working order <input type="checkbox"/> Personnel are trained in using, maintaining and storing PPE 	
SECURITY	Comments (if any)
<ul style="list-style-type: none"> <input type="checkbox"/> Designated area for lost or stolen property <input type="checkbox"/> Lost children point and plan <input type="checkbox"/> Security Management / personnel / crowd control briefing of site and relevant facilities are adequate for the type of event being held issues e.g. Liquor Licence requirements 	

Person responsible for this assessment: _____



APPENDIX 2 – Temporary Food Notification *THIS FORM IS A REQUIREMENT UNDER THE FOOD ACT 2001*

**Temporary Events Notification
FOOD ACT 2001**

ATTN: ENVIRONMENTAL HEALTH

1. Event Details;

Name: _____

Location: _____

Date(s): _____

Time(s): _____

2. Event Organiser Details;

Name: _____ Organisation: _____

Address: _____

Postal Address: _____ Email: _____

3. Details of person responsible for organising/coordinator event food stalls;

Name: _____

Postal Address: _____

Telephone: (business hours): _____ (after hours): _____

mobile: _____

Fax: _____ Email: _____

4. Name of stall/holder food business and type of food to be sold (use next page for multiple food outlets)

Name: _____

Type of food: _____

5. Name of Council where your business resides/food business notification number

****NOTE: ACTIVE REFRIDGERATION SHOULD BE CONSIDERED FOR EVENTS THAT OPERATE OVER A LONG PERIOD (i.e. MORE THAN 6 HOURS) ****



Name and/or number of stall	Name of stallholder or name of food business and proprietor	Address of stallholder or food business	Phone, mobile and fax numbers of stallholder/food business	Types of food to be sold	Name of Council where business resides/food business notification number

