|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Event / Facility Name | Venue | Date of first inspection | Date of second inspection | Date of third inspection |
|  |  |  |  |  |
| Infrastructure Details  |
| Identify Area: | Identify Area: |
| Description | Type | Total Area | Disable access | Description  | Type | Total Area | Disabled access |
|  |  |  | 🗆Yes 🗆No |  |  |  | 🗆Yes 🗆No |
| Access/Egress (tick) | General Assessment  | Traffic Flow (tick) | General Assessment  |
| 🗆Clear/Accessible 🗆Emergency 🗆Thoroughfares 🗆Other  |  | 🗆Pedestrians Separated 🗆Safe Passage 🗆Adequate Signage 🗆Other  |  |
| Amenities (tick)  | General Assessment  | Signage (tick)  | General Assessment  |
| 🗆Clean Fresh Water 🗆Catering Facilities 🗆Adequate 🗆Other |  | 🗆Adequate Signage (entries, exits, toilet facilities)🗆Hazardous areas/substances 🗆First Aid 🗆Fire Extinguishers 🗆Other  |  |
| Fire Prevention (tick) | General Assessment  | Emergency Procedures (tick) | General Assessment  |
| 🗆Fire Extinguishers/blankets 🗆Tested/In date 🗆Ignition source clear access 🗆Other  |  | 🗆Emergency Response Plan 🗆Onsite induction conducted 🗆Site/Evacuation Maps 🗆Other  |  |
| First Aid (tick) | General Assessment  | Staff, Volunteers & Contractors (tick) | General Assessment  |
| 🗆First Aid Stations Suitably Located 🗆Clearly Signed/Accessible 🗆Facilities Adequate 🗆Communication Adequate  |  | 🗆Induction conducted 🗆Details Stored on site 🗆Other |  |
| Electrical (tick) | General Assessment  | Permits, Licensing & Registration (tick) | General Assessment  |
| 🗆RCDs 🗆Testing & Tagging Completed 🗆Testing & Tagging Documentation 🗆Public Electrocution Protection Adequate 🗆Other |  | 🗆Vehicles & Motorised Craft 🗆Aquatic 🗆Hazardous Chemical Storage 🗆Scaffolding & Temporary Infrastructure 🗆Liquor License 🗆Mobile Plant Certified Operators  |  |
| Utilities/Site Services (tick) | General Assessment  | Lighting (tick) | General Assessment  |
| 🗆Location power, water & mains identified 🗆Overhead Powerlines Identified 🗆 Site Overlay 🗆Other |  | 🗆Adequate Natural Lighting or Artificial 🗆Portable Lighting 🗆Emergency Lighting  |  |
| Staging & Platforms (tick) | General Assessment  | Weather Conditions (tick) | General Assessment  |
| 🗆 All seating, fences, staging/platforms are signed off by a certified rigger/scaffolder and or engineer🗆 Sighted national competency & 🗆 Site Overlay 🗆 Other |  | 🗆Use current Australian Bureau of Meteorology information to ascertain weather conditions [www.bom.gov.au](http://www.bom.gov.au) 🗆 Weather conditions monitored e.g. signage well secured for windy conditions, non-slip mats for wet conditions, and shade,sunscreen and water provisions for heat🗆 Wind speeds monitored and inflatable structures must cease operation when wind speed reaches 40 km per hour |  |

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| --- | --- | --- | --- |
| Work at Heights (tick) | General Assessment  | Manual Handling (tick) | General Assessment  |
| 🗆Right Equipment 🗆Certified Operators 🗆 Evidence of compliance  |  | 🗆 Induction conducted/Adequate training provided🗆 Loads are delivered as close a possible 🗆 Light, small loads & physical aids are used 🗆 SMART - S size up the load M move in close A always bend your knees R raise object using your legs T turn using your feet |  |
| Inflatable Structures (tick) | General Assessment  | Noise Levels (tick) | General Assessment  |
| 🗆Thorough check conducted prior to use including anchoring🗆Adequate anchors 🗆 Monitored for prevailing wind conditions |  | 🗆 Maximum noise level 90 decibels before 6pm 75 decibels after 6pm 🗆 Base levels checked 🗆 Limited public addresses prior to 9.00am daily |  |
| Vendors /Exhibitors (tick) | General Assessment  | Radio Communications (tick) | General Assessment  |
| 🗆Insurance Certificates sited 🗆 Structures & signage secured 🗆 Electrical equipment tagged and tested (vendor cost) |  | 🗆Adequate supply 🗆 Adequate coverage 🗆Adequate back up supply  |  |

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|  | **WHS Adviser to****Complete** | **Emergency Planning Committee to Complete** |
| **Hazards Identified** | **Safety Action Plan** |
| **Inspection Checklist** | **Yes** | **No** | **Hazard** | **Priority** | **Action** | **Who** | **Timeframe** | **Done** |
| **POLICIES AND PROCEDURES**  |  |  |  |  |  |  |  |  |
| Relevant polices displayed:· Occupational Health & Safety· Rehabilitation and Return to Duty |  |  |  |  |  |  |  |  |
| Relevant WHS Act, Regulations, WorkersCompensation are readily accessible: |  |  |  |  |  |  |  |  |
| The following critical documentation is in order:· Risk Management Folder· Incident Report Log· Incident investigation Forms· Return to Duties Forms· Hazard Register· Chemical Register & SDS· Workers Compensation Forms· Workplace Health & Safety IncidentForms |  |  |  |  |  |  |  |  |
| Emergency Evacuation Procedures:· In place and displayed· Practiced and documented |  |  |  |  |  |  |  |  |
| Health and Safety Information displayed |  |  |  |  |  |  |  |  |
| **AQUATIC FACILITY**  |  |  |  |  |  |  |  |  |
| **Electrical:** |  |  |  |  |  |  |  |  |
| Switch board preferable enclosed |  |  |  |  |  |  |  |  |
| Wiring in good condition |  |  |  |  |  |  |  |  |
| Battery charger in good condition |  |  |  |  |  |  |  |  |
| No broken plugs, sockets or switches |  |  |  |  |  |  |  |  |
| No frayed or damaged leads |  |  |  |  |  |  |  |  |
| Portable power tools in good condition |  |  |  |  |  |  |  |  |
| No temporary leads on floor |  |  |  |  |  |  |  |  |
| No strained leads |  |  |  |  |  |  |  |  |
| Testing and Tagging- 6 monthly & documented |  |  |  |  |  |  |  |  |
| Earth leakage system/circuit breakers |  |  |  |  |  |  |  |  |
| Systems / GPOs not overlooked |  |  |  |  |  |  |  |  |
| **Lighting:** |  |  |  |  |  |  |  |  |
| Good natural lighting |  |  |  |  |  |  |  |  |
| Adequate illumination |  |  |  |  |  |  |  |  |
| Switches located near exit door |  |  |  |  |  |  |  |  |
| **Fire Protection:** |  |  |  |  |  |  |  |  |
| Emergency fire instructions displayedand available |  |  |  |  |  |  |  |  |
| Closest public fire brigade location isnoted |  |  |  |  |  |  |  |  |
| Site Plan including emergency exitpoints, fire fighting equipment location and assemble point |  |  |  |  |  |  |  |  |
| Extinguishers and Fire Blankets in place clearly marked and serviced within the last 12 months |  |  |  |  |  |  |  |  |
| Street and fire hydrants |  |  |  |  |  |  |  |  |
| Exit doors easily opened from the inside |  |  |  |  |  |  |  |  |
| Illuminate Exit signs with battery backupin appropriate locations |  |  |  |  |  |  |  |  |
| Fire Exits clear of obstructions |  |  |  |  |  |  |  |  |
| Emergency egress from upper floors |  |  |  |  |  |  |  |  |
| Training for Fire Emergency andevacuation drills carried out |  |  |  |  |  |  |  |  |
| **First Aid Room:** |  |  |  |  |  |  |  |  |
| Sign to indicate location |  |  |  |  |  |  |  |  |
| Members aware of location ofFirst Aid room |  |  |  |  |  |  |  |  |
| Entry and exit walkways kept clear |  |  |  |  |  |  |  |  |
| Access door accommodates stretcher |  |  |  |  |  |  |  |  |
| First aid room sterile environment(as far as possible) |  |  |  |  |  |  |  |  |
| Cabinets and contents clean and orderly |  |  |  |  |  |  |  |  |
| First aid cabinet and containers clearlylabelled |  |  |  |  |  |  |  |  |
| Minimum stock/equipment that meetsEvent requirements |  |  |  |  |  |  |  |  |
| Treatment couch with blankets andpillows |  |  |  |  |  |  |  |  |
| Sunscreen for Patrol members |  |  |  |  |  |  |  |  |
| Emergency numbers displayed |  |  |  |  |  |  |  |  |
| Injury reporting/manual handling posters |  |  |  |  |  |  |  |  |
| Universal precautions and PPE |  |  |  |  |  |  |  |  |
| Supply of soap and towels |  |  |  |  |  |  |  |  |
| Sharps kit and/or container |  |  |  |  |  |  |  |  |
| Sink with running hot/cold water andboiling water accessible |  |  |  |  |  |  |  |  |
| Access to ice packs in freezer |  |  |  |  |  |  |  |  |
| Rubbish bin |  |  |  |  |  |  |  |  |
| Landline telephone (or mobile phone at absolute minimum) |  |  |  |  |  |  |  |  |
| **Equipment Storage** |  |  |  |  |  |  |  |  |
| Ergonomic storage designed to minimise lifting problems (between knee & shoulder) as far as practicable |  |  |  |  |  |  |  |  |
| No heavy gear (>20kg) stored aboveshoulder height or below knee height |  |  |  |  |  |  |  |  |
| Floors around storage racks clear ofrubbish |  |  |  |  |  |  |  |  |
| Designated and signed storage areas |  |  |  |  |  |  |  |  |
| Storage racks fixtures in good condition |  |  |  |  |  |  |  |  |
| Entry and Exit walkways kept clear |  |  |  |  |  |  |  |  |
| Even surfaces in floor, no cracks or holes |  |  |  |  |  |  |  |  |
| Compressed air usage signage |  |  |  |  |  |  |  |  |
| Low head height obstructions |  |  |  |  |  |  |  |  |
| Pressure vessel inspections |  |  |  |  |  |  |  |  |
| Appropriate PPE signage and provisions |  |  |  |  |  |  |  |  |
| **Work Areas:** |  |  |  |  |  |  |  |  |
| -Tools stored appropriately |  |  |  |  |  |  |  |  |
| - Clear of rubbish |  |  |  |  |  |  |  |  |
| - No damaged hand tools |  |  |  |  |  |  |  |  |
| - No damaged power tools |  |  |  |  |  |  |  |  |
| - Work area height appropriate |  |  |  |  |  |  |  |  |
| - No sharp edges or protrusions |  |  |  |  |  |  |  |  |
| - Low head height obstructions |  |  |  |  |  |  |  |  |
| **Housekeeping:** |  |  |  |  |  |  |  |  |
| Oil and grease removed |  |  |  |  |  |  |  |  |
| Clear passage ways |  |  |  |  |  |  |  |  |
| No slip/trip hazards |  |  |  |  |  |  |  |  |
| Soap and washing facilities |  |  |  |  |  |  |  |  |
| No cluttered storage areas |  |  |  |  |  |  |  |  |
| Drainage of accumulated water |  |  |  |  |  |  |  |  |
| Clean sand traps |  |  |  |  |  |  |  |  |
| Bin located at suitable points around event site and emptied regularly |  |  |  |  |  |  |  |  |
| **Hazardous Chemicals Site:** |  |  |  |  |  |  |  |  |
| Chemical register accessible |  |  |  |  |  |  |  |  |
| Chemical register up to date |  |  |  |  |  |  |  |  |
| SDS for all chemicals |  |  |  |  |  |  |  |  |
| SDS less than 5 years old |  |  |  |  |  |  |  |  |
| All containers clearly labelled |  |  |  |  |  |  |  |  |
| Approved Hazardous SubstancesCabinet |  |  |  |  |  |  |  |  |
| Do special storage conditions apply? |  |  |  |  |  |  |  |  |
| **Flammable Gas****(Oxy/acetylene/LPG/Other):** |  |  |  |  |  |  |  |  |
| Signage |  |  |  |  |  |  |  |  |
| Separation from ignition sources |  |  |  |  |  |  |  |  |
| Well-ventilated area |  |  |  |  |  |  |  |  |
| Cylinders secured/labelled |  |  |  |  |  |  |  |  |
| LPG Cylinder within test date |  |  |  |  |  |  |  |  |
| Connection hoses/fittings in goodcondition |  |  |  |  |  |  |  |  |
| Medical oxygen cylinders not storedwith other flammable gases /liquids |  |  |  |  |  |  |  |  |
| Flammable liquids(Quantity < 250ltr > 250ltr) |  |  |  |  |  |  |  |  |
| **Appropriate signage:** |  |  |  |  |  |  |  |  |
| Security |  |  |  |  |  |  |  |  |
| Containment of spills |  |  |  |  |  |  |  |  |
| Clean-up of spills |  |  |  |  |  |  |  |  |
| Labelling of flammable liquids |  |  |  |  |  |  |  |  |
| Well-ventilated area |  |  |  |  |  |  |  |  |
| Separation from ignition sources |  |  |  |  |  |  |  |  |
| Condition/type of containers |  |  |  |  |  |  |  |  |
| **Amenities** |  |  |  |  |  |  |  |  |
| Non-slip surfaces in toilets and showers |  |  |  |  |  |  |  |  |
| No cluttered storage or floors |  |  |  |  |  |  |  |  |
| Toilet / change cubicles safelyconstructed |  |  |  |  |  |  |  |  |
| No broken tiles, glass or mirrors |  |  |  |  |  |  |  |  |
| Hygienic and well maintained |  |  |  |  |  |  |  |  |
| **Administration / Office** |  |  |  |  |  |  |  |  |
| Workstation adequate for tasks |  |  |  |  |  |  |  |  |
| Photocopier toner/fumes controlled |  |  |  |  |  |  |  |  |
| Non-slip floor coverings |  |  |  |  |  |  |  |  |
| No cluttered storage areas or floors |  |  |  |  |  |  |  |  |
| Safe storage or boxes/items |  |  |  |  |  |  |  |  |
| Safe storage of tables/chairs |  |  |  |  |  |  |  |  |
| First Aid Kit  |  |  |  |  |  |  |  |  |
| **Access** |  |  |  |  |  |  |  |  |
| Access is free of hazards and inline with Lifesaving Management Plans |  |  |  |  |  |  |  |  |
| Ramps and board walkways wellmaintained |  |  |  |  |  |  |  |  |
| Facility Access points are well signedposted for general public and emergency services |  |  |  |  |  |  |  |  |