Competition Safety Plan Template

Version 4.0

October 2018

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### Competition Safety Plan

#### 8.1 Purpose

* This Competition Safety Plan is intended to document the preparation and planning to remove, minimise or isolate risks associated with the competition which this safety plan pertains to.
* This Competition Safety Plan should be considered in addition to the Surf Sport Manual and the Competition Safety Manual which provide additional oversight of safety requirements.
* All risk management planning and implementation should be considered in accordance with “Risk management – Principles and Guidelines Standard, AS/NZS ISO 31000:2009”.
* Where a competition is being conducted at a patrolled beach, the Event Manager should obtain a copy of the site Patrol Operations Manual – Section A, which will offer additional local context to the site in terms of safety management and also seek local experience people’s input into the competition safety plan.

#### 8. 2 Competition Details

|  |  |
| --- | --- |
| **Competition Name:** |  |
| **Competition Location:** |  |
| **Competition Date/s:** |  |

#### 8.3 Event Tide Times

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Day 1 High Tide** |  | **Day 1 Low Tide** |  | **Tide Height** |  |
| **Day 2 High Tide** |  | **Day 2 Low Tide** |  | **Tide Height** |  |

#### 8.4 Key Competition Personnel Form

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Role** | **First Name** | **Last Name** | **Mobile #** | **email address** | **Radio Channel #** | **Notes** |
| **Event Manager** |  |  |  |  |  |  |
| **EM Mentor** |  |  |  |  |  |  |
| **Event Referee** |  |  |  |  |  |  |
| **Event Safety Officer** |  |  |  |  |  |  |
| **Patrol Captain** |  |  |  |  |  |  |
| **Water Safety Officer** |  |  |  |  |  |  |
| **Work Crew Manager** |  |  |  |  |  |  |
| **First Aid / Officer** |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
| **Helicopter** |  |  |  |  |  |  |
| **NZ Police -SAR** |  |  |  |  |  |  |
| **NZ Police -Crime** |  |  |  |  |  |  |
| **Ambulance** |  |  |  |  |  |  |
| **Coastguard** |  |  |  |  |  |  |
| **Fire Service** |  |  |  |  |  |  |
| **Pollution / Spills** |  |  |  |  |  |  |
| **Regional Council** |  |  |  |  |  |  |
| **Hospital** |  |  |  |  |  |  |
| **Medical Centre** |  |  |  |  |  |  |
| **Emergency Dental** |  |  |  |  |  |  |
| **Civil Defence** |  |  |  |  |  |  |

**8.5 Competition Site Plan**

**Insert site plan here.**

Should include a topographical image overlaid with;

Proposed water and beach arenas

First aid

Vehicle beach access points

Toilets

Possible helicopter landing zone

Ambulance parking/pick up zone

Normal life guard patrol area

#### 8.6 Alternative Competition Site Plan

**Insert alternative site plan here.**

Should include a topographical image overlaid with;

Proposed water and beach arenas

First aid

Vehicle beach access points

Toilets

Possible helicopter landing zone

Ambulance parking/pick up zone

Normal life guard patrol area

**8.7 Competition Safety Plan**

To be completed in conjunction with the Risk Assessment Matrix (8.9)

|  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **P R E - Competition** - Hazard Identification and Risk Analysis | | | | | | | | | | | |
| **Hazard** | **Risk Description** | **Location of Hazard** | **Existing Control Measures** | **Risk Assessment** | | | | **Alternative control measures** | **Decisions** | | |
| **Impact** | **Likelihood** | **Risk Level** | **Acceptable Risk ?** | **Residual Risk Level** | **Acceptable Risk ?** | **Priority** |
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|
| **E N V I R O N M E N T** | | | | | | | | | | | |
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**8.8 Competition Safety Plan – (continued)**

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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **P R E - Competition** - Hazard Identification and Risk Analysis | | | | | | | | | | | |
| **Hazard** | **Risk Description** | **Location of Hazard** | **Existing Control Measures** | **Risk Assessment** | | | | **Alternative control measures** | **Decisions** | | |
| **Impact** | **Likelihood** | **Risk Level** | **Acceptable Risk ?** | **Residual Risk Level** | **Acceptable Risk ?** | **Priority** |
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| **P E O P L E** | | | | | | | | | | | |
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**8.9 Competition Safety Plan – (continued)**

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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **P R E - Competition** - Hazard Identification and Risk Analysis | | | | | | | | | | | |
| **Hazard** | **Risk Description** | **Location of Hazard** | **Existing Control Measures** | **Risk Assessment** | | | | **Alternative control measures** | **Decisions** | | |
| **Impact** | **Likelihood** | **Risk Level** | **Acceptable Risk ?** | **Residual Risk Level** | **Acceptable Risk ?** | **Priority** |
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| **E Q U I P M E N T** | | | | | | | | | | | |
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**8.10 Risk Assessment Process/Matrix**

The Risk Assessment Matrix requires us to consider both the likelihood and potential impact or consequences of each individual risk. A Risk Factor from 1 – 5 is applied to both the ‘likelihood’ and potential ‘impact’ for each of the identified risks. The two risk factors are then multiplied, which provides a score which determines the level of risk.

## **Steps required to identify hazards and analyse risk**

## **Step One** – Identify the work activity(s) that are to be carried out

## **Step Two** – Identify which workers and other people are likely to be affected by the work activity.

## **Step Three** – Identify the hazards associated with the proposed work activity. Consider environmental factors, the equipment or structures to be used and the capability and competency of those expected to undertake the work.

## **Step 4** – Undertake a risk analyse using the Risk Assessment matrix which requires consideration of the both the consequences and probability of risk to provide an estimate of the risk magnitude. Risk analysis is the process of estimating the magnitude of the risk and deciding what actions to take. Risk Magnitude is assessed using the probability and consequence scales below.

### **Probability scale**

|  |  |  |
| --- | --- | --- |
| Score | Scale | Frequency of accident or illness |
| 1 | Rare | Would only occur in exceptional circumstances. |
| 2 | Unlikely | Incident conceivable at some time, but only remotely possible. |
| 3 | Possible | Could occur at some time, has probably happened in the past. |
| 4 | Likely | Will probably occur in most circumstances, known to have happened in the past. |
| 5 | Almost certain | Expected to occur in most circumstances, regularly occurred in the past. |

### **Consequence scale**

|  |  |  |
| --- | --- | --- |
| Score | Scale | Severity of accident or illness |
| 1 | Insignificant Injuries | No real injury or illness resulting – e.g. minor bumps, bruises or abrasions. |
| 2 | Minor Injuries | First aid or minor medical treatment is required – e.g. sprains, strains and cuts. |
| 3 | Significant Injuries | Injury or illness requiring treatment by a qualified medical practitioner such as a GP or A&E, e.g. fractures, dislocations or wounds needing stitches. |
| 4 | Serious Injuries | Life or limb threatening injury or illness requiring immediate emergency medical assistance (hospitalisation), e.g. multiple trauma in juries with potential for permanent disablement. |
| 5 | Fatality | One or more multiple fatalities are possible. |

A risk assessment category (Critical, High, Moderate or Low) for each hazard is compiled by using the chart below. Hazards with the highest rating should be given priority.

### **Risk Assessment Matrix**

|  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Consequence | Fatality | 5.0 | 5.0 | 7.5 | 10.0 | 12.5 | 15.0 | 17.5 | 20.0 | 22.5 | 25.0 |
|  | 4.5 | 4.5 | 6.75 | 9.0 | 11.25 | 13.5 | 15.75 | 18 | 20.25 | 22.5 |
| Serious Injuries | 4.0 | 4.0 | 6.0 | 8.0 | 10.0 | 12.0 | 14.0 | 16 | 18 | 20.0 |
|  | 3.5 | 3.5 | 5.25 | 7.0 | 8.75 | 10.5 | 12.25 | 14.0 | 15.75 | 17.5 |
| Significant Injuries | 3.0 | 3.0 | 4.5 | 6.0 | 7.5 | 9.0 | 10.5 | 12.0 | 13.5 | 15.0 |
|  | 2.5 | 2.5 | 3.75 | 5.0 | 6.25 | 7.5 | 8.75 | 10.0 | 11.25 | 12.5 |
| Minor Injuries | 2.0 | 2.0 | 3.0 | 4.0 | 5.0 | 6.0 | 7.0 | 8.0 | 9.0 | 10 |
|  | 1.5 | 1.5 | 2.25 | 3.0 | 3.75 | 4.5 | 5.25 | 6.0 | 6.75 | 7.5 |
| Insignificant Injuries | 1.0 | 1.0 | 1.5 | 2.0 | 2.5 | 3.0 | 3.5 | 4.0 | 4.5 | 5.0 |
|  |  | 1.0 | 1.5 | 2.0 | 2.5 | 3.0 | 3.5 | 4.0 | 4.5 | 5.0 |
|  |  | Rare |  | Unlikely |  | Possible |  | Strong Possibility |  | Almost Certain |
| Probability | | | | | | | | | | |

|  |
| --- |
| 15-25    **UNACCEPTABLE** risk. The risk cannot be justified on any grounds. High level control measures **must** be applied immediately. |
| 11-14   **HIGH** risk. Moderate to high level control measures **must** be applied to reduce the risk as soon as possible. Monitor continuously for changes. |
| 6.5-10.5 **MODERATE** risk. Low level control measures should be considered and applied to mitigate, eliminate, prevent or reduce the risk. The level of risk may however be acceptable, provided existing control measures remain in place. Monitor for changes. |
| 1-6.25    A **LOW** level of risk, which may be acceptable, provided existing control measures remain in place. Monitor for changes. |

#### 8.11 Daily Hazard Identification and Risk Assessment Form – Part A

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  | | **Daily Hazard and Risk Assessment Form** | | | | | | | | | | | | | | | | |
| **Competition** |  | | **Date** | **/ /** | **Time** | **:** | **Name** |  | | | | | **Signature** |  | | | | |
| **PREVAILING WEATHER CONDITIONS (CIRCLE)** | | | | | | | | | | | | | Impact | Risk Level | | Accept? | | |
| **Wind Strength** | Still | | Light | Moderate | Strong |  |  | |  |  |  | |  |  | |  | | |
| **Wind Direction** | Northerly | | Nor’Easterly | Easterly | Sou’Easterly | Southerly | Sou’Westerly | | Westerly | Nor’Westerly | Nil | |  |  | |  | | |
| **Weather** | Clear | | Scattered Cloud | Overcast | Showers | Heavy Rain | Storm | |  |  |  | |  |  | |  | | |
| **Wave Height** | <0.5 | | -1 | -1.5 | -2 | -2.5 | -3 | | -3.5 | -4 |  | |  |  | |  | | |
| **Surf Conditions** | Glassy | | Slight Chop | Choppy | Rough | Very Rough |  | |  |  |  | |  |  | |  | | |
|  | | **EVENTS IN PROGRESS (CIRCLE)** | | | | | | | | | | | | | | | | |
| **Age Group** | < 8 | | < 10 | < 12 | < 14 | < 16 | < 19 | | Open | Masters | |  |  | |  | |  |
| **Event** | Sprints | | Flags | Surf | Tube | Board | Ski | | Rescue | Relay | | Iron | Taplin | | Boat | | Canoe |
| **Arena** | Sprint | | Flags | Water 1 | Water 2 | Water 3 | Boat | | Canoe | IRB | |  |  | |  | |  |

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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Hazards** | **Risk Description** | **Risk Assessment** | | | | **Control Measures** | **Risk Assessment** | | | | **Alternative Control Measures** | **Decisions** | | |
| **Consequences** | **Likelihood** | **Risk Level** | **Acceptable Risk?** | **Consequences** | **Likelihood** | **Risk Level** | **Acceptable Risk?** | **Residual Risk Level** | **Acceptable Risk?** | **Priority** |
| **ENVIRONMENT** | | | | | | | | | | | | | | |
| Weather Conditions |  |  |  |  | Y / N |  |  |  |  | Y / N |  |  | Y / N |  |
| Wave Conditions |  |  |  |  | Y / N |  |  |  |  | Y / N |  |  | Y / N |  |
| Rips / Current |  |  |  |  | Y / N |  |  |  |  | Y / N |  |  | Y / N |  |
| Natural Debris |  |  |  |  | Y / N |  |  |  |  | Y / N |  |  | Y / N |  |
| Rubbish |  |  |  |  | Y / N |  |  |  |  | Y / N |  |  | Y / N |  |
| Pollution |  |  |  |  | Y / N |  |  |  |  | Y / N |  |  | Y / N |  |
| Stingers |  |  |  |  | Y / N |  |  |  |  | Y / N |  |  | Y / N |  |
| Holes |  |  |  |  | Y / N |  |  |  |  | Y / N |  |  | Y / N |  |
| Structures |  |  |  |  | Y / N |  |  |  |  | Y / N |  |  | Y / N |  |

#### 8.11 Daily Hazard Identification and Risk Assessment Form – Part B

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Hazards** | **Risk Description** | **Risk Assessment** | | | | **Control Measures** | **Risk Assessment** | | | | **Alternative Control Measures** | **Decisions** | | |
| **Consequences** | **Likelihood** | **Risk Level** | **Acceptable Risk?** | **Consequences** | **Likelihood** | **Risk Level** | **Acceptable Risk?** | **Residual Risk Level** | **Acceptable Risk?** | **Priority** |
| **PEOPLE** | | | | | | | | | | | | | | |
| Officials |  |  |  |  | Y / N |  |  |  |  | Y / N |  |  | Y / N |  |
| Water Safety |  |  |  |  | Y / N |  |  |  |  | Y / N |  |  | Y / N |  |
| Support Crew/s |  |  |  |  | Y / N |  |  |  |  | Y / N |  |  | Y / N |  |
| Competitors |  |  |  |  | Y / N |  |  |  |  | Y / N |  |  | Y / N |  |
| Supporters |  |  |  |  | Y / N |  |  |  |  | Y / N |  |  | Y / N |  |
| Spectators |  |  |  |  | Y / N |  |  |  |  | Y / N |  |  | Y / N |  |
| Public |  |  |  |  | Y / N |  |  |  |  | Y / N |  |  | Y / N |  |
|  |  |  |  |  | Y / N |  |  |  |  | Y / N |  |  | Y / N |  |
|  |  |  |  |  | Y / N |  |  |  |  | Y / N |  |  | Y / N |  |

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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **EQUIPMENT** | | | | | | | | | | | | | | |
| Arena Equipment |  |  |  |  | Y / N |  |  |  |  | Y / N |  |  | Y / N |  |
| IRBs |  |  |  |  | Y / N |  |  |  |  | Y / N |  |  | Y / N |  |
| Boat / Canoe |  |  |  |  | Y / N |  |  |  |  | Y / N |  |  | Y / N |  |
| Skis |  |  |  |  | Y / N |  |  |  |  | Y / N |  |  | Y / N |  |
| Boards |  |  |  |  | Y / N |  |  |  |  | Y / N |  |  | Y / N |  |
| Vehicles – Beach |  |  |  |  | Y / N |  |  |  |  | Y / N |  |  | Y / N |  |
| Vehicles – Road |  |  |  |  | Y / N |  |  |  |  | Y / N |  |  | Y / N |  |
|  |  |  |  |  | Y / N |  |  |  |  | Y / N |  |  | Y / N |  |
|  |  |  |  |  | Y / N |  |  |  |  | Y / N |  |  | Y / N |  |

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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Risk Indicators | 1 | Minor Equip. Loss | 2 | Major Equip. Loss | 3 | DNF/Scratchings | 4 | Minor Injuries | 5 | Major Injuries | 6 | Loss of Time | 7 | Loss of Process | 8 | Loss of Life |

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Recommendations (Circle)** | Commence | Delay | Modify Events | Change Venue - Some | Cancel Some Events | Increase Water Safely |  |
| Continue | Consult T. Managers | Reduce Athlete #s | Change Venue - All | Cancel All Events | Mandatory PSE use |  |

#### 8.12 Water safety and First Aid requirements (equipment and people)

#### FIRST AID / MEDICAL SERVICES

|  |  |
| --- | --- |
| **Who has been engaged to provide first aid / medical support?** |  |
| **Where will the service be located at the venue?** |  |
| **What hours will the service be open and available?** |  |
| **What is the agreed scope of services being provided?** |  |
| **What is the level of qualifications of the provider(s)?** |  |

#### WATER SAFETY

|  |  |  |  |
| --- | --- | --- | --- |
| **Equipment Required** | **Number of equipment to be used** | **Number of qualified people** | **Lifeguard / HR Competencies to use equipment** |
| IRB Engine and Hull Units |  |  |  |
| Rescue Tubes |  |  |  |
| Rescue Boards |  |  |  |
| Radios |  |  |  |
| First Aid Posts – Trauma and Medical Support |  |  |  |
| Binoculars – spotters |  |  |  |
|  |  |  |  |

#### WATER SEARCH PARTY (In water search party)

|  |  |  |
| --- | --- | --- |
| **Who has been engaged to provide water search party?** |  |  |
| **Where will the service be located at the venue?** |  |  |
| **What hours will the service be on duty?** |  |  |
| **What is the agreed scope of services being provided?** |  |  |
| **What is the level of qualifications of the provider(s)?** |  |  |

#### WATER SAFETY TEAM (IRB Safety Team)

|  |  |  |
| --- | --- | --- |
| **Who has been engaged to provide water safety support?** |  |  |
| **Where will the service be located at the venue?** |  |  |
| **What hours will the service be on duty?** |  |  |
| **What is the agreed scope of services being provided?** |  |  |
| **What is the level of qualifications of the provider(s)?** |  |  |

#### 8.13 Missing Competitor At Sea - Emergency Response Plan

|  |  |
| --- | --- |
| **MISSING COMPETITOR AT SEA – EMERGENCY RESPONSE PLAN** | |
| **Reflex Tasking** | * Immediately close all arenas via radios to officials, continuous sounding of air horns & whistles, and waving of flags to competitors. * Identify who is missing and what identifies them (e.g. clothing, size, clothing colour, M/F) |
|  | * IRB to place pink buoy or another identifiable object that will remain in place at Last Known Point (LKP) then sit behind surf break parallel to floater& await instructions from the Water Safety Officer (WSO). |
|  | * Consider dropping dye, at LKP and if conditions permit consider dropping a floater (competent life guard wearing fins, PFD, wetsuit) at LKP to float with prevailing current, ensuring that at least one spotter maintains visual contact with the floater at all times. * Deploy spotters with radios or runners to high points. |
|  | * Supporters to immediately clear competitors equipment from the affected arena/s, then keep out of affected arena/s. |
|  | * Team managers to check in with their competitors and assign competent swimmers (LG) only, who have fins and goggles/masks to the Arena Referees (AR) in the affected arena/s. * Coaches to report immediately to the AR in their assigned arena and organise their searchers in lines while awaiting instructions from the AR. |
|  | * Competitors to exit the water immediately upon continuous sounding of the air horn, whistles, or waving of flags before reporting firstly to their team manager at a pre designated point. * Competent swimmers who have fins & goggles/mask should then report immediately to their coach in their designated arenas. Note all swimmers involved with the search need to be identifiable differently to the missing person (e.g. pink bennies, different coloured hi viz vests |
|  | * Water Safety Officer uses nearest capable IRB to pick up LKP buoy from beach and drop of buoy at LKP. * WSO then liaise with IRBs under ESO instructions to either ferry searchers to search zone or begin parallel grid search as directed by ESO. |
|  | * ESO to assume position of Incident Controller until relieved by appropriate authority. * ESO immediately appoints a scribe to record relevant details of times, decisions and communications. * ESO appoint person to dial 111 and liaise with emergency services. |
|  | * Arena Referees (AR) instruct officials to immediately clear the water arena of competitors and craft. * AR to liaise with ESO and Coaches to deploy competent swimmers to search zone and duties. * Officials to mobilise supporters only after cleared to do so by the ESO or their delegate. |
| **Initial Action** |  |
| **Ascertain Details:** | * Location, problem, number of patients, mechanism of injury (trauma), prior medical history (medical) |
| **Complete Incident Log:** | * Record time, date, informant details, arrival of additional support, any treatment provided, patient information |
| **Notify:** | * Notify event safety service / medical team, call 111 and ask for ambulance, Team Manager of the Club involved |
| **Consider:** | * Is there a risk/hazard posed for other people? Does racing need to stop temporarily to allocate safety resources to the incident(s).Is there an appropriate environment to treat the victim(s)? |
| **At Scene** |  |
| **Actions:** | * DRSABCD is the priority protocol followed by secondary surveys (trauma + medical) to ascertain the problem and provide appropriate care. * If need be, refer to Lifesaving First Aid Manual for specific patient management protocols for medical or trauma incidents. * Consider the on-going treatment of the patient and whether they need to be moved into a more appropriate environment (i.e. out of direct sun, wind, water etc.) |
| **At Completion** |  |
| **Debrief:** | * In serious / critical incident trauma and medical cases, the Event Safety Officer should lead a debrief of the incident to assess and ensure all persons involved are okay (emotionally and physically) and that the response process is reflected on with any learning’s being recorded. * The debrief process is not a forum for apportioning blame for any errors, rather an opportunity to discuss what did happen (facts) from each person’s perspective and to identify any person(s) that require additional support. * In a critical incident such as a death or severe (life threatening) trauma, SLSNZ Lifesaving Manager should be notified to initiate SLSNZ Peer Support Services. |
| **Reporting:** | * Ensure a SLSNZ Incident Report Form is completed for any incident and forward to your local SLSNZ office for processing. * Feel free to attach additional information as required as it is better to keep a more detailed account of the incident in the event of a formal investigation as a result of the incident. |

#### 8.14 Major Medical/First Aide - Emergency Response Plan

|  |  |
| --- | --- |
| **MAJOR MEDICAL / MAJOR FIRST AID TRAUMA** | |
| **Initial Action** |  |
| **Ascertain Details:** | * Location, problem, number of patients, mechanism of injury (trauma), prior medical history (medical) |
| **Complete Incident Log:** | * Record time, date, informant details, arrival of additional support, any treatment provided, patient information |
| **Notify:** | * Notify event safety service / medical team, call 111 and ask for ambulance, Team Manager of the Club involved |
| **Consider:** | * Is there a risk/hazard posed for other people? Does racing needs to stop temporarily to allocate safety resources to the incident(s). Is there an appropriate environment to treat the victim(s)? |
| **At Scene** |  |
| **Actions:** | * DRSABCD is the priority protocol followed by secondary surveys (trauma + medical) to ascertain the problem and provide appropriate care. * If need be, refer to Lifesaving First Aid Manual for specific patient management protocols for medical or trauma incidents. * Consider the on-going treatment of the patient and whether they need to be moved into a more appropriate environment (i.e. out of direct sun, wind, water etc.) |
| **At Completion** |  |
| **Debrief:** | * In serious / critical incident trauma and medical cases, the Event Safety Officer should lead a debrief of the incident to assess and ensure all persons involved are okay (emotionally and physically) and that the response process is reflected on with any learning’s being recorded. * The debrief process is not a forum for apportioning blame for any errors, rather an opportunity to discuss what did happen (facts) from each person’s perspective and to identify any person(s) that require additional support. * In a critical incident such as a death or severe (life threatening) trauma, SLSNZ Lifesaving Manager should be notified to initiate SLSNZ Peer Support Services. |
| **Reporting:** | * Ensure a SLSNZ Incident Report Form is completed for any incident and forward to your local SLSNZ office for processing. * Feel free to attach additional information as required as it is better to keep a more detailed account of the incident in the event of a formal investigation as a result of the incident. |

#### 8.15 Fire - Emergency Response Plan

|  |  |
| --- | --- |
| **FIRE** | |
| **Initial Action** |  |
| **Ascertain Details:** | * Location, problem, number of patients, likely source of fuel, level of threat to people and/or property |
| **Complete Incident Log:** | * Record time, date, informant details, arrival of additional support, any treatment provided, patient information |
| **Notify:** | * Notify event safety service / medical team, call 111 and ask for Fire Service, if aware if injured people - also request an ambulance response. Inform team managers if event is impacted. |
| **Consider:** | * Is there a risk/hazard posed for people or property? Does racing needs to stop temporarily to allocate resources to the incident to put out / control a fire, protect people, move to safeguard property etc. |
| **At Scene** |  |
| **Actions:** | * All involved are reminded that self-preservation is a priority in any response. * People are a priority over property in the case of a fire. Ensure the protection of people initially before considering protection of property. * Assess the availability of resources to mitigate the fire (i.e. water, hoses, buckets, capable people etc.) * For any people affected: DRSABC is the priority protocol followed by secondary surveys (trauma + medical) to ascertain the problem and provide appropriate care. * If need be, refer to Lifesaving First Aid Manual for specific patient management protocols for medical or trauma incidents (i.e. burns). |
| **At Completion** |  |
| **Debrief:** | * In serious / critical incident trauma and medical cases, the Event Safety Officer should lead a debrief of the incident to assess and ensure all persons involved are OK (emotionally and physically) and that the response process is reflected on with any learning’s being recorded. * The debrief process is not a forum for apportioning blame for any errors, rather an opportunity to discuss what did happen (facts) from each person’s perspective and to identify any person(s) that require additional support. * In a critical incident such as a death or severe (life threatening) trauma, SLSNZ Lifesaving Manager should be notified to initiate SLSNZ Peer Support Services. |
| **Reporting:** | * Ensure a SLSNZ Incident Report Form is completed for any incident and forward to your local SLSNZ office for processing. * Feel free to attach additional information as required as it is better to keep a more detailed account of the incident in the event of a formal investigation as a result of the incident. |

#### 8.16 Tsunami - Emergency Response Plan

|  |  |
| --- | --- |
| **TSUNAMI WATCH / WARNING** | |
| **Initial Action** |  |
| **Ascertain Details:** | * Has a tsunami warning or tsunami watch been issued by the Ministry of Civil Defence? The Event Manager should confirm this directly rather than being drawn into speculation by other parties. * When is the published impact time of the first tsunami, and therefore how much time do you have to evacuate the coastal zone? |
| **Complete Incident Log:** | * If possible, record the time the incident commenced. Keep a record of key decisions through the incident period. |
| **Notify:** | * SLSNZ CEO, Event Safety Officer, Event Manager, Event Referee, Team Managers, competitors and spectators |
| **Consider:** | * The level of response relative to the classification of the incident (i.e. a ‘watch’ is a lower risk threshold than ‘warning’). Ensure the level of urgency is relative to the anticipated time available to evacuate. What are the optimal evacuation routes to allow people to get to the recommended 23m above sea level to avoid the impact of a tsunami wave. |
| **At Scene** |  |
| **Actions:** | * If there is a witnessed earthquake in the coastal zone or any unusual observations to a sudden change in sea state (such as water levels noticeably dropping), immediately discontinue racing. Radio the on water lifeguards and ask them to direct all persons back to shore immediately **(phase one: get people out of water)** * Inform Team Managers, Surf Officials, competitors, participants and spectators of a possible tsunami threat and encourage them to enact an emergency evacuation to higher ground ASAP. *In a witnessed coastal earthquake event, there is insufficient time to remove equipment*. Focus must be on a swift, orderly evacuation away from the coast to a targeted elevation of 23m above sea level **(phase two: evacuate to high ground)** * If the event is not witnessed and the tsunami warning / tsunami watch indicates a longer lead-in time, in addition to evacuating the beach, consider removing rescue craft and first aid equipment to higher ground to be used in a possible post tsunami recovery. * Continue to monitor the situation/threat through official channels (i.e. Ministry of Civil Defence updates). |
| **At Completion** |  |
| **Debrief:** | * In the event a tsunami does strike, a debrief may not be appropriate in lieu of more immediate needs. Following any tsunami warning / tsunami threat stand-down, it is appropriate to conduct a debrief so learning can be captured for any future incident. |
| **Reporting:** | * The SLSNZ CEO will identify and confirm the need for any reports. *Under no circumstance should the aquatic elements of a surf life saving event be conducted while an official tsunami warning or watch is in place for the coastal area involved.* |

#### 8.17 Earthquake - Emergency Response Plan

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| --- | --- |
| **EARTHQUAKE** | |
| **Initial Action** |  |
| **Ascertain Details:** | * For injured people – refer to action plan under “Major Trauma / Medical” * If a fire is caused by the earthquake – refer to action plan under “Fire” * If the earthquake was of sufficient magnitude that is has caused damage or was significant, operationalize the actions outline in the action plan “Tsunami Warning/Watch” |
| **Complete Incident Log:** | * Record times of key decisions, number of patients involved, arrival of additional support, any treatment provided, patient information as possible. |
| **Notify:** | * Trauma / Medical Issues – dial 111 and request Ambulance, Fire – dial 111 and request Fire Service |
| **Consider:** | * In the event of a minor earthquake, consider if any sewerage or storm water pipes could have been breached and potentially impact on water quality. * Check media sources to confirm any official warnings or directives following the earthquake event. * Consider what support those involved at the event may be able to offer the general public or other emergency services where there may be wide spread damage, injury, death (but no threat or a tsunami). |
| **At Scene** |  |
| **Actions:** | **Further to action items identified through other action plans (referred to above)…:**   * Seek out on-going information from official sources (Ministry of Civil Defence website) * If possible, contact SLSNZ CEO or delegated SLSNZ staff member for advice/support * Contact other emergency services and offer to provide support / capacity (i.e. trained first aiders, rescue vehicles, shelter, search parties etc.). * Continue to communicate with all relevant parties regarding the incident response and any updates as they become available. |
| **At Completion** |  |
| **Debrief:** | * In the event a major earthquake does strike, a debrief may not be appropriate in lieu of more immediate needs in the short term. |
| **Reporting:** | * If possible, complete SLSNZ Incident Reports for each patient. Submit these to your local SLSNZ office for processing. * The SLSNZ CEO will identify and confirm the need for any additional report related to the earthquake event. |

#### 8.18 Sudden Unanticipated Storm - Emergency Response Plan

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| **SUDDEN UNANCITIPATED STORM (EXTREME WINDS)** | |
| **Initial Action** |  |
| **Ascertain Details:** | * For injured people – refer to action plan under “Major Trauma / Medical”. * The risk of a storm or squall should be monitored throughout any event to ensure that mitigating factors can be applied to reduce the risk of harm to people and property. |
| **Complete Incident Log:** | * Record times of key decisions, number of patients involved, arrival of additional support, any treatment provided, patient information as possible. |
| **Notify:** | * Trauma / Medical Issues – dial 111 and request Ambulance |
| **Consider:** | * What equipment (boards, skis, paddles, oars, fences, signage, shade shelters, tools, sound equipment etc.) is sitting on the beach which could become a serious hazard in the event of extreme wind or get damaged, how can it be secured safely? * Are there tents on the beach and, if yes, how well anchored are the tents or do they require dropping and securing? |
| **At Scene** |  |
| **Actions:** | * Monitor the weather forecasts prior to and during a Competition. * Where a risk of high winds is possible, ensure this is communicated to all persons in daily briefings (work party, surf officials, event safety team, team managers etc.). * If a severe storm (to the point where the sea/beach conditions will become unacceptably dangerous) is imminent, discontinue racing and ensure all people are safety removed from water until the conditions are safe to continue.   *Where a squall is visibly identified approaching the event site, provide warnings and direction to key groups:*   * Work Party: Check tent/marquee anchor points, drop event signage/fences if not secured, support teams with tents or gear as needed. * Team Managers: Focus on securing club equipment / craft then secure club tents * Event Referee: Surf Officials to support securing of on beach event equipment such as sound systems, lane markers etc.) |
| **At Completion** |  |
| **Debrief:** | * A debrief may not be essential in the case of a response to high winds however consider conducting a debrief in the event of any injuries to people or damage to equipment or if there was an opportunity identified to enhance the response plan in future (i.e. a near miss, any lack of cohesion in the response plan, any confusion identified during response). |
| **Reporting:** | * Ensure a SLSNZ Incident Report Form is completed for any incident and forward to your local SLSNZ office for processing. |

#### 8.19 Major Pollution - Emergency Response Plan

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| --- | --- |
| **MAJOR POLLUTION DISCOVERY / WATER QUALITY** | |
| **Initial Action** |  |
| **Ascertain Details:** | * Location, type of pollution involved (i.e. oil vs sewerage vs run-off), Identify source if possible |
| **Complete Incident Log:** | * Record times of key decisions (when first aware of quality issue, when discontinued event etc.), number of patients involved if people have got sick, arrival of additional support, any treatment provided, patient information as possible. |
| **Notify:** | * Notify the local environmental authority (normally the regional council) immediately. If people are becoming ill, either refer to local medical facility or in serious cases dial 111 and seek ambulance. |
| **Consider:** | * What risk level might the pollution pose for people? * Are there implications for the general public beyond those involved with the event? * Are there alternative sites that may not be affected by the water quality issue that may allow Competition to continue? * Has there been any previous water quality issues at the site and, if so, what may be the time impact for the issue to be resolved? |
| **At Scene** |  |
| **Actions:** | * On being made aware of the water quality issue, discontinue aquatic events immediately until such time the issue is resolved. * Contact the local pollution / water quality authority, inform them of the problem and seek advice regarding the impact the problem may have on people. * If the water quality issue is obviously not going to be resolved quickly (i.e. oil spill or major run-off issue) identify and check alternative racing areas. If suitable, consider moving racing to the new site to continue the event. * \*If possible, consider running any beach events while any water quality issues are addressed\* * Continue to monitor the situation, seek on going advice from experts / authorities. |
| **At Completion** |  |
| **Debrief:** | * A debrief may not be essential in the case of a response to water quality issues however consider conducting a debrief in the event of any illness to people or if there was an opportunity identified to enhance the response plan in future. |
| **Personnel Support:** | * Ensure a SLSNZ Incident Report Form is completed for any incident and forward to your local SLSNZ office for processing. |

#### 8.20 Competition Safety Checklist

**Section 1: Competition Details**

|  |  |  |  |
| --- | --- | --- | --- |
| **Competition Date(s):** |  | **Competition Venue(s):** |  |
| **Competition Sanctioned?** |  | **Event Manager:** |  |
| **Description of Competition:** |  | | |

**Section 2: Safety & Risk Management**

|  |  |  |
| --- | --- | --- |
| **Task #** | **DESCRIPTION OF ACTION / CONSIDERATION** | **C:\Users\Intelligenz NJH\AppData\Local\Microsoft\Windows\Temporary Internet Files\Content.IE5\8N06LVP4\MC900072629[1].gifCOMPLETED** |
| 1 | Competition is formally sanctioned by SLSNZ |  |
| 2 | Event Referee appointed: |  |
| 3 | Event Safety Officer appointed: |  |
| 4 | Site hazard and risk register completed |  |
| 5 | First Aid/Medical Service confirmed (relative to competition scope) |  |
| 6 | Water Safety people and assets confirmed (relative to competition scope) |  |
| 7 | Disaster management protocols confirmed and discussed with Event Referee, Event Safety Officer, First Aid/Medical provider and Team Managers |  |
| 8 | Communications system confirmed for the competition |  |
| 9 | A Competition Safety Plan template completed for the competition and peer reviewed. |  |
|  |  |  |

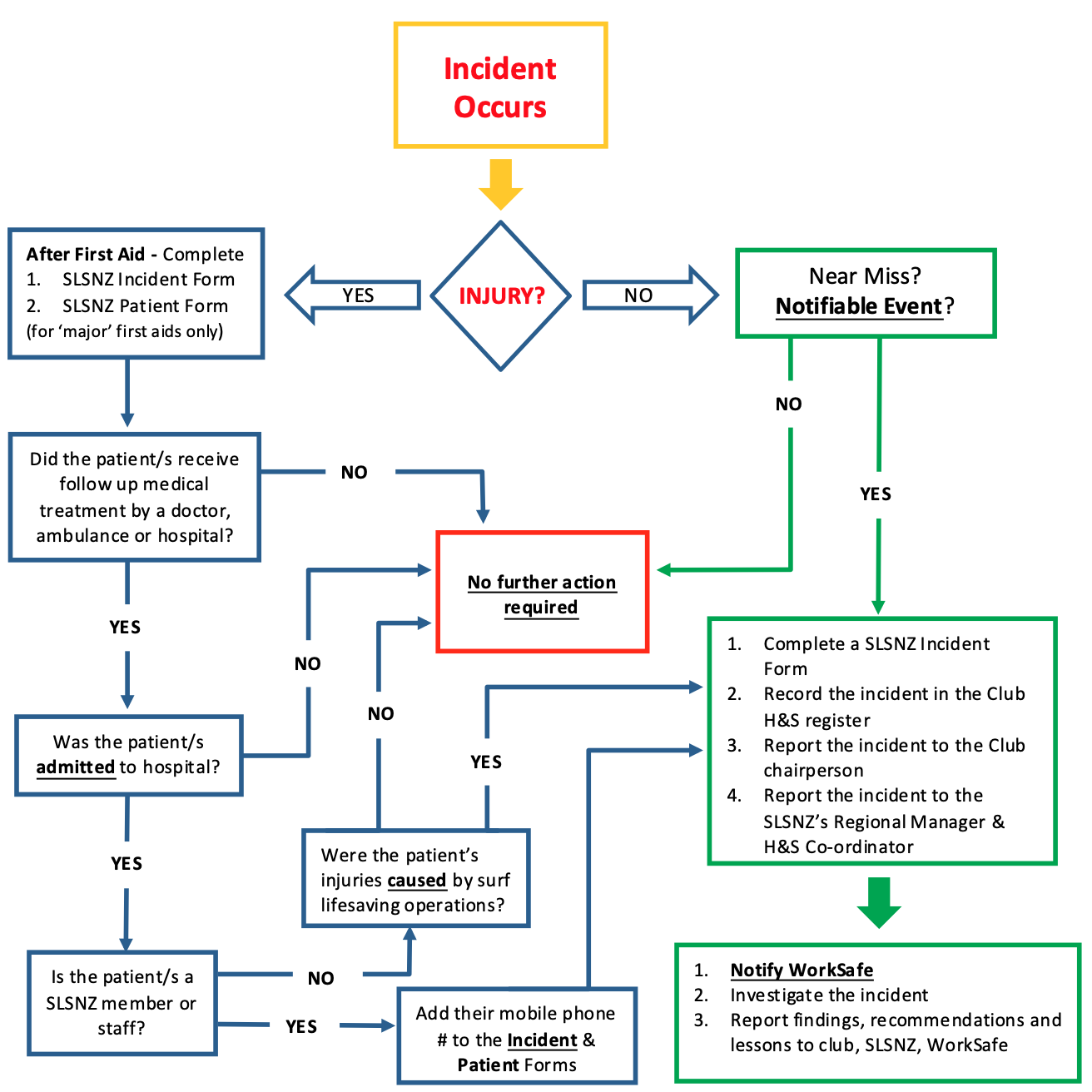
**Section 3: Declarations**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| *I confirm that I have completed the actions identified above in assessing and arranging the health and safety requirements for this competition.* | | | | | |
| **Name:** |  | **Signature:** |  | **Date:** |  |
| *I confirm that I have peer reviewed the safety planning and proposed risk management for this Competition and confirm that in my opinion the competition has appropriate safety controls in place.* | | | | | |
| **Name:** |  | **Signature:** |  | **Date:** |  |

#### 8.21 Safety Briefing - Competitor / Team Manager / Surf Official

Add or remove tittles as required for the event

|  |  |  |
| --- | --- | --- |
| **Competition Element** | **Item(s) to discuss** | **Questions/Notes to cover off for this Competition** |
| **Personnel** | Competition roles & responsibilities |  |
| **Weather (current and forecast)** | Tides - Times |  |
| Temperatures - Land/Sea |  |
| Sea Conditions |  |
| Wind |  |
| **Water Safety** | Location and amount |  |
| Identification |  |
| Scope/Safety cover |  |
| **Critical Incident Protocol** | Briefing of CIP |  |
| **First Aid** | Location and Scope |  |
| Identification |  |
| **Contingency Plan** | Activating Protocol |  |
| **Timetable** | Alterations |  |
| **Competition Area** | Course Layout |  |
| **Order of Events** | Timetable for competition |  |
| **Code of Conduct** | Reiterate |  |
| **Meeting Attendance** | Confirmation of attendance |  |
| **Questions** | Any safety questions? |  |
|  |  |  |
|  |  |  |

**8.21 SLSNZ Incident and Injury Notification Flow Chart**

**Notifiable Events includes:**

* **Notifiable Death** – when a person has been killed as a result of work.

### Notifiable Incident – when a person’s health and safety is seriously threatened or endangered as a result of a work situation, i.e. if someone has been exposed to a serious or immediate risk to their health and safety because of an unplanned or uncontrolled work incident.

### Notifiable Injury - an injury that requires (or would usually require) the person to be admitted to hospital for immediate treatment. ‘Admitted to a hospital’ means being admitted to hospital as an inpatient for any length of time – it does not include just being taken to the hospital for out-patient treatment by a hospital’s A&E department.

Major First Aid - Any incident where a victim needs a higher level of medical treatment or is handed to another agency e.g. doctor, ambulance, hospital.

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| **SLSNZ Incident Report Form CONFIDENTIAL** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | |
| Incident & Team Details | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Police Tasking Information | | | | | | | | | | | | | | | | | |
| Club | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | |  | | | Tasking event # | | | | | | | |  | | | | | | | |
| Incident date | | | | | | | | | | | / / | | | | | | | | | | | | | | | | | | | | | | | |  | | | Tasking officer # | | | | | | | |  | | | | | | | |
| Incident location | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | |  | | | Tasking start time | | | | | | | |  | | | | | | | |
| GPS or grid ref | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | |  | | | Tasking finish time | | | | | | | |  | | | | | | | |
| Incident start time | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | |  | | | Incident Analysis | | | | | | | | | | | | | | | |
| Incident finish time | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | |  | | | Probability of reoccurrence | | | | | | | |  | | | | | | | |
| Incident level (0-4) | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | |  | | | Consequence / impact | | | | | | | |  | | | | | | | |
| Number of patients involved | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | |  | | | Accident investigated | | | | | | | | Yes No | | | | | | | |
| SLSNZ workplace incident | | | | | | | | | | | Yes No | | | | | | | | | | | | | | | | | | | | | | | |  | | | Action required | | | | | | | | Yes No | | | | | | | |
| Did this happen during patrol? | | | | | | | | | | | Yes No | | | | | | | | | | | | | | | | | | | | | | | |  | | | Patrol occurrence | | | | | | | |  | | | | | | | |
| Summary of incident *(please enter what happened, when and the response effort below)* | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | Patrol team name | | | | | | | |  | | | | | | | |
|  | | | EAP required | | | | | | | | Yes No | | | | | | | |
|  | | | EAP actioned | | | | | | | | Yes No | | | | | | | |
| Incident Type | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Mass Rescue & Patient Assist Details | | | | | | | | | | | | | | | | | | | | | | |  | |
| Rescue | | | | | | | | | |  | | Complete patient report form | | | | | | | | | | | | | | |  | | | Name | | | | | | | | | | |  | | | | | | | | | | | *Patient 1* | |
| Patient assist | | | | | | | | | |  | |  | | | | | | | | | | | | | | |  | | | Address | | | | | | | | | | |  | | | | | | | | | | |
| First aid (major) | | | | | | | | | |  | | Complete patient report form | | | | | | | | | | | | | | |  | | | Age\* | | | | | | | | | | |  | | | | | | | | | | |
| Search | | | | | | | | | |  | | Complete patient report form | | | | | | | | | | | | | | |  | | | Gender\* | | | | | | | | | | |  | | | | | | | | | | |
| Near miss | | | | | | | | | |  | |  | | | | | | | | | | | | | | |  | | | Ethnic origin\* | | | | | | | | | | |  | | | | | | | | | | |
| Activities Involved | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | Name | | | | | | | | | | |  | | | | | | | | | | | *Patient 2* | |
| Swimming | | | | | | | | | |  | | Fishing | | | | | | | | | | | | |  | |  | | | Address | | | | | | | | | | |  | | | | | | | | | | |
| Surfing / bodyboard | | | | | | | | | |  | | Attempt rescue | | | | | | | | | | | | |  | |  | | | Age\* | | | | | | | | | | |  | | | | | | | | | | |
| Sail or boat | | | | | | | | | |  | | Other | | | | | | | | | | | | |  | |  | | | Gender\* | | | | | | | | | | |  | | | | | | | | | | |
| Walking / running | | | | | | | | | |  | |  | | | | | | | | | | | | |  | |  | | | Ethnic origin\* | | | | | | | | | | |  | | | | | | | | | | |
| Incident Conditions *(at start of incident)* | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | Name | | | | | | | | | | |  | | | | | | | | | | | *Patient 3* | |
| *See codes* | Weather | | | | | | | | | | | | | | | | | | | | | | | |  | |  | | | Address | | | | | | | | | | |  | | | | | | | | | | |
| Wave height | | | | | | | | | | | | | | | | | | | | | | | |  | |  | | | Age\* | | | | | | | | | | |  | | | | | | | | | | |
| Surf conditions | | | | | | | | | | | | | | | | | | | | | | | |  | |  | | | Gender\* | | | | | | | | | | |  | | | | | | | | | | |
| Wind strength | | | | | | | | | | | | | | | | | | | | | | | |  | |  | | | Ethnic origin\* | | | | | | | | | | |  | | | | | | | | | | |
| Wind direction | | | | | | | | | | | | | | | | | | | | | | | |  | |  | | | Name | | | | | | | | | | |  | | | | | | | | | | | *Patient 4* | |
| Other: *(rips, holes, equipment...)* | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | Address | | | | | | | | | | |  | | | | | | | | | | |
| Resources Used | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | Age\* | | | | | | | | | | |  | | | | | | | | | | |
| IRB | | | | | | | | | |  | | Radios | | | | | | | | | | | | |  | |  | | | Gender\* | | | | | | | | | | |  | | | | | | | | | | |
| Rescue tube | | | | | | | | | |  | | RWC | | | | | | | | | | | | |  | |  | | | Ethnic origin\* | | | | | | | | | | |  | | | | | | | | | | |
| Rescue board | | | | | | | | | |  | | First aid equipment | | | | | | | | | | | | |  | |  | | | Name | | | | | | | | | | |  | | | | | | | | | | | *Patient 5* | |
| Rescue vehicle | | | | | | | | | |  | | No equipment | | | | | | | | | | | | |  | |  | | | Address | | | | | | | | | | |  | | | | | | | | | | |
| Other: | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | Age\* | | | | | | | | | | |  | | | | | | | | | | |
| Lifeguards / Volunteers Involved | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | Gender\* | | | | | | | | | | |  | | | | | | | | | | |
| First name | | | | | | | Last name | | | | | | | | Surf ID number | | | | | | | | | | | |  | | | Ethnic origin\* | | | | | | | | | | |  | | | | | | | | | | |
|  | | | | | | |  | | | | | | | |  | | | | | | | | | | | |  | | | \*Must complete for all patients. In all cases the outcome will be ‘patient left in stable condition’. If their condition is not stable you must complete a patient report form.  Name & address are optional but must add suburb. | | | | | | | | | | | | | | | | | | | | | | | |
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|  | | | | | | |  | | | | | | | |  | | | | | | | | | | | |  | | | Form completed by | | | | | | | | | | | First name | | | | | | | | Last name | | | | |
|  | | | | | | |  | | | | | | | |  | | | | | | | | | | | |  | | | Signed | | | | | | | | | | |  | | | | | | | | | | | | |
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| **SLSNZ Patient Report Form CONFIDENTIAL** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | |
| Additional Patient Information for Major Rescues, First Aids and Searches. Please store this form in a secure location after completing. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Patient Details | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Incident level (0 - 4) | | | | | | | | | Arr. | | | | 4 | | | | 3 | | | | 2 | | 1 | | | | | 0 | | | | | SLSNZ member | | | | | | | | | Yes / No | | | | | | Number: | | | | |
| Dep. | | | | 4 | | | | 3 | | | | 2 | | 1 | | | | | 0 | | | | |
| First name | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | Gender | | | | | | | | | Male / Female | | | | | | | | | | |
| Last name | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | Ethnic origin (primary) | | | | | | | | |  | | | | | | | | | | |
| Date of birth | | | | | | | | | DD / MM / YYYY | | | | | | | | | | | | | | | | | | | | | | | | Ethnic origin other | | | | | | | | |  | | | | | | | | | | |
| Address & suburb | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| City | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | Was a fatality prevented? | | | | | | | | | Yes / No | | | | | | | | | | |
| Incident Reason | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | |  | | |  | | | |  | | | | |  | | | |  | | | |  | | | |  | | | | |  | | |  | | | | |  |  | | | Other | | Other notes: | | | | | | | |
| Exhaustion | | Poor swimming | | | Drugs / alcohol | | | | Excessive clothing | | | | | Inappropriate equipment | | | | Jellyfish / insect sting | | | | Cramp | | | | Cut / abrasions | | | | | Bruising | | | Burns / sunburn | | | | | Breathing difficulty | Feeling unwell | | |
| Patient Outcomes | | | | | | | | | | | | | | | | | | | | First Aid Treatment | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Left in stable condition | | | | | | | | | | | | | | | |  | | | | History / chief complaint / onset | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Referred to Doctor | | | | | | | | | | | | | | | |  | | | |
| Assisted from the beach | | | | | | | | | | | | | | | |  | | | | Treatment | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Ambulance to hospital | | | | | | | | | | | | | | | |  | | | |
| Helicopter to hospital | | | | | | | | | | | | | | | |  | | | |
| Deceased | | | | | | | | | | | | | | | |  | | | |
| Unknown / Not found | | | | | | | | | | | | | | | |  | | | |
| Equipment Used | | | | | | | | | | | | | | | | | | | |
| Oxygen | | | |  | | | | FA Supplies | | | | | | | |  | | | |
| Defibrillator | | | |  | | | |  | | | | | | | |  | | | |
| Stretcher | | | |  | | | |  | | | | | | | |  | | | | Medications / allergies | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Neck brace | | | |  | | | |  | | | | | | | |  | | | |
| Patient Vitals | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Time | | | Interventions / drugs | | | | | | | | | | | | | | | | Dose | | | | | Response AVPU | | | | | | | | Airway | | | | | Breathing | | | | | Pulse / circulation | | Temp | | | | Blood pressure | | O2 Sat | Bld Gluc | |
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| Search Information | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Missing person details & description | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | Informant information | | | | | | | | | | | | | |
| Name | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | |  | | Informant name | | | | | | | |  | | | | | |
| Phone numbers | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | |  | | Informant phone numbers | | | | | | | |  | | | | | |
| Medical & mental condition | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | |  | | Relationship to missing | | | | | | | |  | | | | | |
| Description of missing person  Age Ethnicity Gender Height & build Hair colour Eye colour  Clothing / belongings | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | |  | | Missing person last location | | | | | | | |  | | | | | |
| Circumstances of disappearance | | | | | | | | | | | | | |
| Point last seen (PLS) | | | | | | | |  | | | | | |
| Last known point (LKP) | | | | | | | |  | | | | | |
| Last seen by whom | | | | | | | |  | | | | | |
| Activity (what doing) | | | | | | | | | | | | | |
| Search Activities by SLS Volunteers | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Time | | | | | | Action | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| NOTE: If there is more than one patient involved in a major incident use a second form. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

# **8.22 Notifiable Events - Investigation and Reporting**

## (Duty Holder review process)

**Follow these steps to do a thorough investigation (review).**

1. Identify all the people involved (victim, witnesses, etc)
2. Get all the facts (who, where, when, what, how, why).
3. Describe the sequence of activities leading up to the incident.
4. Include SLSNZ’s Health and Safety Co-ordinator in your review.
5. Talk to the victim(s) and their families (if appropriate).
6. Identify and analyse the immediate, underlying and root causes of the incident.

**Note:** Identifying underlying causes involves asking a series of ‘why’ questions about the causes you have identified. Each question may have several answers which may lead to further ‘why’ questions. By understanding the reasons for immediate and underlying causes you can make changes that are more likely to be sustainable and effective.

While root causes may be harder to identify, they are more important as they reveal key areas for improvement in your health and safety and/or management systems.

1. Develop and implement actions to prevent a similar incident. Include any actions you’ve already taken and any planned follow-up actions.
2. Review your existing health and safety system, particularly the part of the area related most to the workplace involved in the incident. Specify your system in the report and identify changes needed.

**Note:** The analysis of the cause(s) captured at step 6 should make it clear what corrective actions need to be implemented. These might include improving existing health and safety management systems.

1. Sign the report off.

Once your review has been completed, submit the completed report and supporting documents to the SLSNZ Health and Safety Co-ordinator. Please note the information you provide is subject to the Official Information Act 1982.

It is important that someone in your organisation who holds a leadership or management position signs the report.

For further information about the Duty Holder Review Process, [please contact WorkSafe](https://www.worksafe.govt.nz/contact-us/).