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| **EVENT NAME:** | **EVENT ORGANISER NAME & CONTACT:** |
| **EVENT DATE(s):** | **COLLEGE/PORTFOLIO:**  **LOCATION:** |

This checklist will assist Event Organisers to ensure that general WHS information is provided.

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| All event workers are required to complete this Local Work Health and Safety Induction. | √  when completed |
| Emergency provisions |  |
| On hearing the evacuation tone (usually a ‘whoop’, ‘whoop’ sound), please follow the instructions of the Security Officers and evacuate to the designated evacuation areas. Please do not block any designated emergency exits at any time |  |
| Emergency Exits: |  |
| Emergency Evacuation Point(s): |  |
| Evacuation Map Provided? |  |
| First Aid arrangements |  |
| Location: |  |
| Provided by: |  |
| Security Arrangements |  |
| Informed of [Security](https://www.flinders.edu.au/campus/bedford-park/facilities-services/security) on relevant campus/site - specify if not Bedford Park  24/7 Security number for Bedford Park is (8201 2880) |  |
| If confronted with aggressive behaviour incident ask for assistance from Security and event organisers. |  |
| Toilet Locations |  |
| Location(s): |  |
| General Work Health & Safety | √  when completed or N/A |
| [Work Health and Safety web site](http://www.flinders.edu.au/whs/) – covers policy, procedures and checklists |  |
| If an **accident or incident** occurs, please fill in a Flinders University Incident / Accident Report form on FlinSafe (electronic health and safety system) <https://flinsafeportal.flinders.edu.au/flindersecportal/> (click on ‘Report an incident’ link). Also advise your supervisor and the event organiser. |  |
| **Hazard Reporting**  If there are any issues which may cause harm or illness on the Flinders University/external venue site, please:   * Contact the Event Organiser – this information should be passed on to the University WHS Unit. * Contact Security immediately on 8201 2880 in emergency or if situation is dangerous. |  |
| **Manual Handling**   * Please ensure you use proper manual handling techniques and bend at the knees, not the back. Check the load and path to move before moving.   + Size up the load and think about how it will be moved, including the route.   + Ask can the load be broken up into smaller loads to reduce weight and bulkiness?   + Use mechanical aides such as trolleys and sack trucks   + Ask assistance of other people. * Vary tasks and take regular rest breaks. Change from seating/standing/moving. |  |
| **Slips, Trips and Falls**   * Do not use mobile phones while using the stairs. * Avoid carrying loads down the stairs, especially when they block your view (us a lift where possible) * Use hand rails where provided. * Do not rush or take shortcuts, especially when surfaces are wet |  |
| **Additional Training/Competencies**  Additional instruction, training or competencies maybe required prior to undertaking the work. **Event Organisers** must make sure that any relevant instruction/ training/ or licensing is identified, completed and recorded. |  |
| |  |  | | --- | --- | | Other Safety Information |  | | √  when completed or N/A |
| * It is important that you read and understand the **risk assessment** for the event hazards. * Potential trip hazard may be around any raised edges along walkways, cabling, bags or materials in walkways /thoroughfares. * Ensure you are familiar with the event map as this highlights changes to the normal building and outside areas. * Maintain good housekeeping of your area (i.e. keep clean and tidy) * Potential for heat stroke during hot weather. Please stay hydrated and seek shade. Remember to wear sun protection. * Be aware of any building works and obey signage and stay clear of building site boundaries. * Ensure adequate space is given for access and egress for emergencies (i.e. around stalls, displays and exit doorways). * If low light / night time activities also ensure you have enough light to undertake tasks. * If there are any further hazards present, please be aware of them, control them as best as you can and report them to your supervisor. |  |

**Need More Information? Please discuss with the event organiser**

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**Please retain a copy of this induction with all documentation for this event.**

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| **Please read the induction carefully. I have been WHS inducted and agree to abide by the WHS policies and procedures outlined in the induction.** | | | | | | |
| **Event Name:** |  | | | **Event Date(s):** |  | |
| **Name** | | **Company/Business Area** | **Contact Number** | **Date Inducted** | | **Signature** |
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