**Safety Plan**

**Events and Off-Campus Experience**

Wellbeing and Safety

Unitec - Te Pūkenga

Support and assistance can then be offered to the responsible person or group to ensure the Safety Plan has been completed correctly and ongoing support and guidance can be provided.

Upon completion and **before the event, email a copy** of thisto the:

1. Wellbeing and Safety Advisor for your area: [safety@unitec.ac.nz](mailto:safety@unitec.ac.nz)

2. Your Manager email:

3. Security by emailing: [security@unitec.ac.nz](mailto:security@unitec.ac.nz)

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| **Name and School/Department:** |  | **Manager Name:**  **Manager Mobile #:**  **Manager Email:**  **Approval from Manager: Yes / No**  **Class Number:**  **Number of Attendees:**  **Overseas International Travel: Yes / No**  *(Additional information will be required)*  **Attached if Required:**  Site-Specific Safety Plan  Emergency Management Procedure  H&S Policy  Risk Register  Ensure known medical conditions of participants disclosed to organiser |
| **Location:** |  |
| **Setup OR Departure Date:** |  |
| **Duration:** |  |
| **Pack Down OR Return Date:** |  |
| **Contact Number:**  **Emergency Contact at Unitec:** | **Security 021 610 877**  **Emergency Wellbeing & Safety contacts:**  **WS Advisors: Diane Lorigan 021 033 0117**  **Maree Lightfoot 021 241 2405**  **Bruce Hillard 021 193 1587**  **W&S Lead: Jo Adlam 021 585 060** |
| **Description:** |  | |

**Instructions:**

* To ensure that health, safety and environmental risks regarding yourevent or off-campus experience are identified and controlled, **please complete the Safety Plan below** **and submit to the Wellbeing & Safety Advisor for your area 14 days prior to the event.** For detailed safety assistance, please contact the Wellbeing and Safety team we are here to support you.
* As the organiser, you are required to have manager approval to attend/host the event or off-campus experience.
* As the organiser, you are required to do a risk assessment for the environment you wish to hold your event or off-campus experience in. Any risks identified need to be mitigated with controls. All staff and students in attendance are to be informed of these risks and controls and acknowledge this by **signing their name at the end of the document.**
* The responsibility of the organiser is to ensure the plan is followed. It is also **your** responsibility to ensure compliance with the requirements of appropriate legislation, i.e., Health and Safety at Work Act 2015**;** Health and Safety at Work (General Risk and Workplace Management) Regulations 2016; Hazardous Substances and New Organisms Amendment Act 2015 and Transport and Building Acts etc.
* Please identify the risks in the following pages and describe how each potential risk can be managed to eliminate or reduce potential for harm to a person. **Ask yourself, “what if?”**
* Please refer to the risk assessment matrix below. When performing a risk assessment, you need to consider the likelihood of a risk causing harm to a person or persons **and** the severity of injury that could result.
* Please complete the checklist before completing the Safety Plan below.

***Hierarchy of Controls – Health and Safety at Work Act 2015 and Health and Safety at Work (General Risk and Workplace Management) Regulations 2016***

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| **HIERARCHY OF CONTROLS** | |
| CONTROL | DESCRIPTION |
| Eliminate | You must first attempt, where reasonably practicable, eliminate the risk to health and safety |
| Substitute | If the risk cannot be eliminated, you must substitute (wholly or partly) the hazard with that of a lesser risk |
| Isolate | If you cannot substitute the risk (wholly or partly), you must isolate the hazard to prevent any person coming into contact with it |
| Engineering controls measures | If you cannot isolate the hazard, you must implement engineering controls to reduce the risk |
| Administrative controls | If the risk remains, you must implement administrative controls i.e., training, policies, procedures |
| PPE | If the risk remains, you must ensure provision and use of personal protective equipment |

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| **HAZARD CHECKLIST – INCLUDING BUT NOT LIMITED TO:** | | | |
| **CATEGORY** | **HAZARD** | **CATEGORY** | **HAZARD** |
| Setup / Pack Down | Access / Egress  Carrying / Lifting  Distance to Setup Area  Parking Availability | Human Factors | Fatigue  Stress  Frustration  Alcohol Consumption  Unskilled / Supervision Required |
| Site | Site Induction  PPE or Special Clothing Required  Restricted Work Area  Slip / Trip Hazards  Unauthorised Personnel  Special Activity Area | Electrical and Equipment | Exposed Cables  Electrical Equipment  Generator  Fuel  Overhead Cables  Specialised Equipment Required |
| Environmental | Wind / Storm  UV Exposure  Waste Management  Noise | Participants | Overcrowding  Lost Students  Medical Condition  Inform Responsibilities |
| Security | Threat to person or property  Theft  Patrol Required | Staff / Volunteers | Training  Unitec Policies / Procedures  Event Details |
| Incident Management | Injury  Illness  Accident  Fire | Traffic / Pedestrian Control on Campus | Speeds / Moving Vehicles  Drop Off / Pick Up Zones  Cyclists  Public |
| Food Preparation | Allergic reaction  Other illness i.e., food poisoning  Hot plates  Sharp Utensils  Refrigeration  Gas Cylinder  Prepared offsite | Travel off Campus | Bus or Fleet Vehicle Required  Visa for Overseas Travel  Vaccinations for Overseas Travel  Remote Area  Poor Reception  Long Driving Distance  Radio Communication |

***Unitec Risk Assessment Matrix***

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| **LIKELIHOOD:**  The chance of a risk causing harm to a person(s)  Consider:   1. Number of people exposed 2. How often they are exposed 3. How long they are exposed | | **SEVERITY:**  The injury or illness that could result from being exposed to a risk | |
| **5** | **Almost Certain:** Common or repeated occurrence, no risk  controls in place | **5** | **Extreme**: Multiple fatalities |
| **4** | **Likely:** Known to occur | **4** | **Major:** Single fatality, extensive injuries, long term illness or lost time  injury (LTI) |
| **3** | **Possible:** Some risk controls in place | **3** | **Moderate:** Medical treatment required, or restricted / modified  duties required |
| **2** | **Unlikely:** Not likely to occur, risk controls in place are mostly  effective | **2** | **Minor:** Superficial or first aid treatment |
| **1** | **Rare:** Practically impossible, effective risk controls are in place | **1** | **Insignificant:** No injuries or damage to health |

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|  | **Severity** | | | | |
| **Likelihood** | **1**  **Insignificant** | **2**  **Minor** | **3**  **Moderate** | **4**  **Major** | **5**  **Catastrophic** |
| **5 Almost Certain** | **Medium**  **(11)** | **Medium**  **(16)** | **High**  **(20)** | **Extreme**  **(23)** | **Extreme**  **(25)** |
| **4 Likely** | **Medium**  **(7)** | **Medium**  **(12)** | **High**  **(17)** | **High**  **(21)** | **Extreme**  **(24)** |
| **3 Possible** | **Low**  **(4)** | **Medium**  **(8)** | **Medium**  **(13)** | **High**  **(18)** | **High**  **(22)** |
| **2 Unlikely** | **Low**  **(2)** | **Low**  **(5)** | **Medium**  **(9)** | **Medium**  **(14)** | **High**  **(19)** |
| **1 Rare** | **Low**  **(1)** | **Low**  **(3)** | **Low**  **(6)** | **Medium**  **(10)** | **Medium**  **(15)** |

***Refer to the hazard checklist and risk assessment to complete the following:***

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| **Potential Hazards** | **What is the risk?** | **Risk Assessment with no Controls** | | | **Add Controls** | **Risk Assessment with Controls** | | | **Comments** |
| Likelihood | Severity | Score | Likelihood | Severity | Score |
| *Offsite events kit* | *Unprepared for unexpected events* | *3* | *3* | *Medium (13)* | ***Prepare****: know the weather, wind, and sites/locations you are visiting before you go.*  *Clothing and footwear – wear suitable for the environment.*  *Take another set of spare warm clothing as backup. Take sun protection options for hot weather activities.*  *Ensure First Aid kits, emergency equipment and a means of communications that will work in your location are taken to the event.*  *Know emergency contact numbers of emergency services.*  *Ensure water and food supply is adequate for duration of event.* | *2* | *3* | *Medium (9)* |  |
| *Emergency Alerts (****Orange/Red****) - Weather (when a storm is forecast) or other emergency events* | *Travel in vehicle/s or other is unsafe, movement at site unsafe, potential for flooding, winds, heavy rain, snow, thunder, lightning, tornadoes, and rough seas* | *4* | *4* | *High (18)* | *Follow all Government and Civil Defence Emergency Management guidance.*  *If Emergency Alert* ***Orange/Red*** *in place postpone or cancel.*  *Seek information before travel commenced and approval prior to leaving to ensure it is safe to continue.*  ***No travel*** *should be undertaken under* ***Orange/Red*** *Emergency Alert without Manager and TP Wellbeing & Safety Region Lead / TP Wellbeing & Safety Director approval.* | *3* | *3* | *Medium (13)* | [Storms — Get Ready — Emergency preparedness in New Zealand](https://getready.govt.nz/emergency/storms/)  [Local civil defence groups » National Emergency Management Agency](https://www.civildefence.govt.nz/find-your-civil-defence-group/) |
| *Water – our ocean, coasts, beaches, lakes, rivers, and swimming pools* | *Drowning-death, non-drowning related hospitalisations (impact on individuals and families and society)* | *4* | *4* | *High (18)* | *Ensure all kaimahi/staff and learners know the location of the event.*  *Ensure those accompanying are* ***competent swimmers*** *to be effective in supervision of activities.*  *Follow - Prepare, watch out, be aware, know your limits.*  ***Prepare****: know the weather, wind, and tides before you go.*  *Clothing and footwear – wear suitable for the environment.*  *Take another set of spare warm clothing as backup.*  ***Watch Out****: Plan your swim. Stay close to shorelines. Stay visible to others in the group.*  *Consider and review currents and tides of your location.*  ***Be Aware:***  *Plan entry and exit points to the water. Avoid boat ramps and areas of craft activity.*  *Swim between flags on lifeguard patrolled beaches.*  ***Know your limits:***  *Life jackets worn by individuals.*  *Life jackets worn on boats or crafts; flotation devices fitted as required.* | *3* | *3* | *Medium (13)* | [Home | Water Safety New Zealand (watersafetynz.org)](https://www.watersafetynz.org/) |
| *Unexpected injury, illness, or traumatic medical event/s* | *Serious injury, illness, or death*  *(impact on individuals and families and society)* | *3* | *3* | *Medium (13)* | *Ensure First Aid kits, emergency equipment and a means of communications that will work in your location are taken to the event.*  *Identify First Aid trained kaimahi/staff on or at event.*  *Know emergency contact numbers of emergency services.*  *Know emergency medical providers nearby for medical care, emergency care or hospitalisations.*  *Know emergency contact numbers of Manager.*  *Know emergency contact numbers of Wellbeing and Safety Advisor / Manager and Wellbeing & Safety Region Lead* | *2* | *3* | *Medium (9)* |  |
| *Parental, caregiver, or other supervision/support providers on overnight stays for course related activity* | *Personal harm (impact on individuals and families and society)* | *3* | *4* | *High (18)* | *Make sure appropriate balance in terms of gender, experience, skills of those accompanying event.*  *Ensure you are familiar with and comfortable that those accompanying are prepared to have learners in their care.*  *Safety checks under the Vulnerable Children Act 2014 or Police vetting under the Education Act 1989 are required to be completed and returned before departure of the event.*  *If water activities are part of event, those accompanying need to be* ***competent swimmers*** *to be effective in supervision of activities.* | *2* | *2* | *Low (5)* |  |
| *Driving and transport safety* | *Accident or event that causes personal harm, serious injury, illness, or death*  *(impact on individuals and families and society)* | *3* | *4* | *High (18)* | *All drivers, including kaimahi/staff, learners and accompanying parental, caregiver or supervisors must be appropriately licensed and aware of all driving regulations that apply.*  *Copy of full driver’s license to be provided prior to departure for event.*  *All vehicles (including personal cars) much have current registration and a current warrant of fitness (or certificate of fitness for commercial vehicles).*  *All vehicles should be appropriately insured.*  *Drivers should be trained and/or competent to drive the vehicle in the intended traffic, road, weather conditions.*  *Drivers and passengers should wear seatbelts were fitted and required.*  *The number of driving hours required for the journey and the length of the driver’s working day should comply with NZ Transport Agency regulations www.nzta.govt.nz.* | *2* | *3* | *Medium (9)* |  |
| *Prescribed medications for those under your care* | *Personal harm* | *4* | *3* | *High (17)* | *Ensure medication plan is provided for each learner as required.*  *Ensure kaimahi/caregivers at event are briefed confidentially of any specific medical needs.*  *Designated person who is First Aid trained can oversee and log medications dispensing.* | *2* | *2* | *Low (5)* |  |
| *Slips, Trips, and Falls* | *Sprains, cuts, bruises, fractures* | *3* | *3* | *Medium (13)* | *Be aware of surroundings.*  *Use appropriate pathways and crossings.*  *Wear suitable footwear.*  *Communicate who to contact in event of injury.* | *2* | *3* | *Medium (9)* |  |
| *Injury / Accident* | *Personal harm, property damage* | *3* | *3* | *Medium (13)* | *Be aware of your surroundings.*  *Ensure all are aware of what to do in the event of an accident or injury and the reporting process.*  *Communicate with any First Aiders attending.*  *Collect attendees’ emergency details.* | *2* | *3* | *Medium (9)* | *Report any incidents into Incident, Injury, Near Miss reporting system of Damstra/Vault* |
| *Heavy loads – carrying / lifting* | *Manually handling error causing injury* | *2* | *3* | *Medium (9)* | *Apply appropriate manual handling techniques, get assistance, or use a trolley.*  *Arrange with Facilities Management (FM) to do any heavy lifting.* | *2* | *2* | *Low (5)* | *Contact FM for assistance as necessary.* |
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**Acknowledgement of Safety Plan and Conditions:**

I confirm that I have read and understood the Safety Plan as documented above in relation to the off-campus experience named above and that I shall abide by the actions and processes identified in the Safety Plan.

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| **Name *(print)*** | **Signature** | **Staff/Student** |  | **Emergency Contact** |
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