

Date Completed:		Name of Parish:	
Person Completing Checklist:		Contact Number:	
Name of Event:		Date & Time of Event:	
Location of Event:		Brief Event Description:	

Complete this checklist when planning for large events such as retreats, fundraisers, camps or conferences (offsite and onsite):

1. Respond 'Yes', 'No' or 'N/A' to the questions in the 'Criteria' column.
2. For responses that are 'No', record the issues in the 'Issues' column and an action must be added.
3. At Parish Council or team meeting, discuss issues, approve actions to resolve the issues and record actions in the 'Actions' column.
4. Assign each action to a person/s, with a completion date for the action. Record this in the 'Persons Responsible' and 'Timeframe' columns.

Criteria	Yes	No	N/A	Issue	Action	Person/s Responsible	Timeframe
Fire Safety Management							
Is a specific person allocated to oversee the preparation and execution of the event?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
Does the register of staff and attendees include emergency contact details for each person?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
Has an itinerary been created for the event, providing information on the activities, who will be where and at what times?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
Do parish workers have the required skills or qualifications to complete and supervise the specific activities safely?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
Have first aid qualified workers been allocated for the event?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
Is there a well-stocked First Aid Kit available and easily accessible?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
Have all requirements regarding working with children and child safety been addressed? <i>Refer to Children and Youth Checklist if applicable</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
Has the event site been inspected and health and safety hazards identified and managed? (e.g. vehicles and pedestrians in shared traffic areas)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				

Criteria	Yes	No	N/A	Issue	Action	Person/s Responsible	Timeframe
Has a risk assessment been completed to eliminate or minimise identified hazards and prevent injury?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
Is the necessary equipment for the event (e.g. recreational equipment) in good condition, safe, and available for use?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
Is a safety switch installed at the event venue?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
If no safety switch is available, have power sources, RCDs, power boards and power leads been tested and tagged?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
Is there an agreed process to manage a medical emergency or provide First Aid? (e.g. Emergency Contact numbers, closest Medical Centre, first aid trained staff)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
Has a process for potential medical or injury situations during the event been agreed and communicated to all staff (e.g. local medical care, emergency numbers)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
Are facilities suitable for any disabled attendees or staff?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				

If you have any questions or concerns, please contact the ACSQ People & Culture Helpline on 3838 7645 and the Safety Team can assist you