



NEW ZEALAND ICE HOCKEY FEDERATION

HEALTH & SAFETY

POLICIES & PROCEDURES MANUAL

for NZIHF Events

Address: PO Box 47381
Ponsonby
Auckland 1144
New Zealand

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1.0 HEALTH & SAFETY POLICY STATEMENT

The **New Zealand Ice Hockey Federation** is the person who conducts a business or undertaking (PCBU) at **PO Box 47381, Ponsonby, Auckland 1144** and will be known throughout this document as the PCBU.

Health and Safety is everyone's responsibility, and everyone is expected to share in our commitment to work together to keep workers and others safe against harm to their health, safety and welfare by eliminating or minimizing risk.

..... **[Regional Association / Club]** will provide fair and effective workplace representations, consultation and co-operation and resolution of issues regarding health and safety.

As we actively promote improvements through advice, information education and training, we will all achieve higher standards of safety for our workers and others in our shared space.

NB: Workers includes: any employee, a contractor or subcontractor, an employee of a contractor or subcontractor, an employee of a labour hire company, an outworker, an apprentice or trainee, a person gaining work experience or a work trial, a volunteer.

To achieve this we will:

- ❖ Systematically identify new hazards, existing hazards and regularly monitor these hazards in our facilities.
- ❖ Working together we will take reasonably practicable steps to ensure that any significant hazards to workers are minimized, and workers are to be protected, where elimination is impracticable.
- ❖ Have systems in place to record all incidents, near misses or injury. We will ensure these are reported and investigated, updating our hazard register and complete our risk management process to eliminate.
- ❖ Communicate actions to prevent harm to any other worker.
- ❖ Our Club committee will have up-to-date knowledge of workplace health and safety. This will include understanding the operations of our club, and the hazards and risks associated with those operations.



2.0 HEALTH AND SAFETY PLAN

2.1 PROCEDURES

All workers and others have a duty of care as follows:

- ❖ Take reasonable care for their own health and safety
- ❖ Take reasonable care that their acts or omissions do not adversely affect the health and safety of others
- ❖ Comply so far as the worker is reasonably able, with any reasonable instruction that is given by the PCBU to comply with the Health & Safety Act.
- ❖ Co-operate with any reasonable policy or procedures of the PCBU relating to health and safety in the workplace, that has been notified to the workers.

2.1.1 SUPERVISION

All activities at the association / club are to have appropriate levels of supervision. Supervisors can include executive association / club personnel, club members, consultants, trained volunteers, or personnel appointed by the executive committee.

Contractors are expected to complete their documentation prior to commencing work on site.

Supervision of children must be the responsibility of the parent and/or caregiver or a person appointed by the executive committee. Children must be supervised at all times while in attendance at our facilities.

2.2 HEALTH AND SAFETY OFFICER

At least one club member of the [Regional Association / Club] is to be appointed as Health and Safety Officer (H&S Officer). **This person is**

This person shall be responsible for:

- ❖ Maintaining and updating the **Hazard Register**.
- ❖ Ensuring the **Visitor Register** is maintained.
- ❖ Addressing new hazards when and where they are identified from others.



- ❖ Completing and dealing with **Accidents and Incident Reports**. This includes investigations into the incident and accidents and also advising WorkSafe NZ as required by legislation.
- ❖ Ensuring that the facilities meet **Occupational Safety and Health** requirements.
- ❖ Ensuring someone on the Match Committee is trained for Health and Safety on event day if the health and safety member is not able to attend.

3.0 RISK MANAGEMENT

3.1 HAZARD IDENTIFICATION AND CONTROL PROCEDURES

Hazards are defined as any thing that has the potential to cause harm or illness within the workplace.

Hazards can be broken into 5 major areas:

- ❖ **Physical:** Weights, falls, slips, lighting, noise, ventilation, burns, vibration, electricity
- ❖ **Chemical:** Cleaners, solvents, fumes, vapours, lack of oxygen, acids, corrosives, sprays, dust, smoke, mist
- ❖ **Biological:** Air conditioning systems, infection, legionnaires disease, needle stick injuries, allergies, insects
- ❖ **Ergonomic:** Work stations, work postures, overuse injuries, seating
- ❖ **Organisational:** Hours of work, work pressure, overtime

All hazards will be listed and controls identified. See Hazard Register.



Where there are significant hazards we will take all practicable steps to:

Eliminate the hazard OR

Isolate the hazard OR

Minimise the hazard

Where the hazards may only be minimised, we will ensure:

- ❖ Protective clothing and equipment (PPE) is provided and used by all workers, at all times as necessary
- ❖ Good work practices are used and maintained
- ❖ Workers are properly trained and/or supervised
- ❖ Where appropriate, and with workers consent, health monitoring in relation to exposure to significant hazards is undertaken
- ❖ Any new hazards identified, the risks identified and then are incorporated into Hazard Register and all workers are informed and can view the H&S register any time
- ❖ Any new machinery/equipment/plant/tasks/chemicals/poisons are assessed before use, and safety controls/practices are established
- ❖ All hazards and the risk they impose will be regularly assessed and controls put in place
- ❖ All workers are aware of emergency and evacuation procedures
- ❖ All workers are aware to complete the Hazard Observation/Improvement Notice and also review the Risk then review with the Club Manager, or the Health & Safety Officer. The H&S Officer will complete an assessment on the risk to confirm.



3.2 HAZARD OBSERVATION / IMPROVEMENT FORM

Hazard Observation/Improvement

Date: ____/____/____

Time: _____ am/pm

Reported by: _____

BUSINESS UNIT: _____

IS IT A:

☐ Hazard ☐ Incident ☐ Near Miss ☐ Improvement

TYPE: *(Tick all applicable)*

☐ Safety ☐ Environment ☐ Maintenance

☐ Process ☐ Housekeeping ☐ Other

SUBJECT: _____

DESCRIPTION: _____

ACTUAL SEVERITY: *(Tick one)*

☐ Insignificant ☐ Minor ☐ Moderate ☐ Major ☐ Significant

POTENTIAL SEVERITY: *(Tick one)*

☐ Insignificant ☐ Minor ☐ Moderate ☐ Major ☐ Significant

IMMEDIATE/TEMPORARY CONTROL OR ACTION

TAKEN: _____



3.3 RISK ASSESSMENT CRITERIA

RISK ASSESSMENT CRITERIA									
		Threat							
Likelihood	Almost Certain	5	10	15	21	25	Extreme		<ul style="list-style-type: none">Stop Process Until Risk Substantially Reduced.High Level Management ResponseContingency PlanFatality or multiple fatality potential
	Likely	4	9	14	20	24			
	Possible	3	8	13	18	23			
	Unlikely	2	7	12	17	22			
	Rare	1	6	11	16	19			
		Insignificant	Minor	Moderate	Major	Catastrophic	Medium		<ul style="list-style-type: none">Requires Management responseInjuries would require Medical Treatment
						Consequence			
							Low		<ul style="list-style-type: none">MonitorFirst Aid Treatment or No Injury



3.4 HAZARD REGISTERS

3.4.1 LOCATION: HOUSEKEEPING FACILITIES

HAZARDS IDENTIFIED	POTENTIAL HARM	SIGNIFICANT HAZARD YES / NO		RISK ASSESSMENT	E	I	M	HAZARD CONTROLS	REGULAR CHECK OF HAZARD CONTROLS IN PLACE				
									TRAINING REQUIRED ✓	Date Checked	Date Checked	Date Checked	Date Checked
Emergency Evacuation								⇒ Is date of last emergency evacuation, within 12 months?					
Housekeeping								⇒ All areas properly cleaned? ⇒ Are all goods stored safely? ⇒ Hot water, soap and drying means available? ⇒ Clean up spills.					
Facilities								⇒ Kept clean and tidy. ⇒ Rubbish bin with lid. ⇒ Hot and cold water.					
Ventilation								⇒ Sufficient fresh air. ⇒ Extraction of contaminated air/steam.					
Contractors and/or Sub-contractors								⇒ Ensure preferred contractors maintain health and safety standards.					
First Aid Kit								⇒ Ensure first aid kit is kept accessible. ⇒ Ensure kit is stocked and maintained in accordance with First Aid Regulations.					
Accident Register								⇒ Are all accidents/incidents recorded in the register?					
Fire Extinguishers								⇒ Are they fully charged? ⇒ Are they within their service period?					
Other People in the Place of Work								⇒ Restrict access.					



HAZARD REGISTERS CONTINUED...

3.4.2 LOCATION: ICE RINK & PLAYING AREA

HAZARDS IDENTIFIED	POTENTIAL HARM	SIGNIFICANT HAZARD YES / NO		RISK ASSESSMENT	E	I	M	HAZARD CONTROLS	REGULAR CHECK OF HAZARD CONTROLS IN PLACE				
									TRAINING REQUIRED ✓	Date Checked	Date Checked	Date Checked	Date Checked
???								⇒					
???								⇒					
???								⇒					
Equipment Storage								⇒					
Zamboni Entrance								⇒					
First Aid Kit								⇒					
First Aid Kit								⇒					
Accident Register								⇒					
Fire Extinguishers								⇒					
Manual Handling								⇒					



HAZARD REGISTERS CONTINUED...

3.4.3 LOCATION: OFFICE / ADMINISTRATIVE AREA

HAZARDS IDENTIFIED	POTENTIAL HARM	SIGNIFICANT HAZARD YES / NO		RISK ASSESSMENT	E	I	M	HAZARD CONTROLS	REGULAR CHECK OF HAZARD CONTROLS IN PLACE				
									TRAINING REQUIRED ✓	Date Checked	Date Checked	Date Checked	Date Checked
Visual Displays Units (Computers)	Occupational Overuse Syndrome (OOS) Stress Fatigue	X					X	⇒ Ensure Approved Code of Practice for Safe Use of VDU's is being complied with. ⇒ Assessment and correction of work station. ⇒ Training and Information on OOS and prevention ⇒ Alternate administration and computer workloads					
Storage of Files, Books and Records	Laceration, bruising, crushing, possibly death.	X					X	⇒ Ensure goods are secured ⇒ Ensure safe means of access and exit.					
Armed Robbery	Stress, assault	X					X	⇒ Refer to Pamphlet / Booklet ⇒ Do as directed - do not put yourself nor others in an unsafe or dangerous situation					
Manual Handling (i.e. lifting, bending, stretching)	Sprains, Strains, pain, discomfort.	X					X	⇒ Identify high-risk activities. ⇒ Use trolleys or manual handling aids ⇒ Reduce or split loads to manageable weight and/or size ⇒ Two person or team lifting ⇒ Training in correct lifting and manual handling techniques					
Electrical Equipment / Leads	Electrocution, Burns possibly death.	X				X	X	⇒ Use electrical appliance close to power source ⇒ Use isolating transformers or residual current device (where necessary)					



4.0 EMERGENCY PROCEDURES

4.1 EVACUATION PLAN

In the case of an emergency event such as fire, earthquake or other event requiring evacuation, all occupants of any of the club's buildings or related facilities shall cease activities immediately and move to the evacuation area, via the safest route (Assemble at designated area – which is clearly sign-posted).

PLEASE MEET AT [NAME YOUR DESIGNATED POINT HERE]

Please note how this will be revealed: e.g. Siren, Loud Speaker
announcement, Alarm ringing?

The **Executive/Match Committee/Health and Safety Officer** will contact the emergency services.

A copy of the evacuation plan identifying your location will be displayed in a prominent place in the club facilities and at any other buildings on site at all times.

4.2 FIRE

Fire extinguishers are to be located in appropriate areas and be readily accessible at the centre at all times.

These fire extinguishers are not to be interfered with for any reason, other than practical use in a fire situation.

Actions at this Association / Club:

- ❖ We have a documented emergency plan – identifying any potential situation and the requirements to action these different plans.
- ❖ Regular emergency evacuation procedures are held (quarterly, six monthly, annually).
- ❖ These evacuation procedures are documented
- ❖ Debrief of these drills are held with the committee and documented plans for continuous improvement that can be made.
- ❖ This is then communicated to the workers and members.



5.0 ACCIDENTS AND INCIDENTS

5.1 REPORTING ACCIDENTS AND INJURY

FIRST AID KITS ARE LOCATED AT: [LOCATED WHERE?]
OUR TRAINED FIRST AIDER IS [NAME]

All accidents and incidents affecting visitors or workers on site are to be reported to the **Health and Safety Officer** and recorded in the on site register. For serious accidents or incidents, the following information is required within 24 hours:

The Health and Safety Officer, an Executive or Match Committee member (responsible for running events on the day) should an incident/accident happen can override any decision by the person affected or next of kin to ring for an ambulance if they consider the situation is serious.

You can use the [Workplace First Aid Needs Assessment Checklist](#) to help identify what's needed at your workplace. This is included in the [First Aid for Workplaces – a Good Practice Guide](#).

Our club has a system for reporting, recording and investigating any incident (or near miss) and any accident that occurs at our club. This will be completed by the Health & Safety Officer and reported through the committee and recorded in the Health & Safety Manual.

Please complete the forms attached as soon as practicable when required.

The Health and Safety Officer will advise WorkSafe NZ of any notifiable event. These must be reported within 7 days of the event. (Notifiable events are described in Attachment 7.1).

WORKSAFE NZ: 0800 030 040

Once investigated, corrective action will be taken to eliminate or minimize.

5.2 SITE SAFETY INSPECTIONS

The Health and Safety Officer will complete a site safety inspection on a regular basis (monthly, quarterly, six monthly or annually).



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If the club is being utilized for a tournament at Regional or National level, the Health & Safety Officer will complete a site safety inspection prior to the tournament and confirm this to the Regional or National body.

Forms are attached for easy reference.



6.0 EVENT MANAGEMENT

TIMELINE	ACTIONS	WHO	PURPOSE	ADVISED	COMPLETED	AMENDMENTS
PRIOR	1. Ensure Tournament Booklet includes H&S, First Aider, Traffic Management as well as sponsors and draws. 2. Checklist of Hazards Completed and reported 3. First Aid Kits replenished	1. Event Committee: 2. H&S Officer of Club Liaise with regional or National body to confirm 3. First Aider to complete	Ensure all participants, volunteers and workers understand H&S is important, parking information is clear, and everyone is well informed of expectations at this event.	Confirmed through Event committee meetings and documented		
ON THE DAY	1. Brief Tournament Committee members 2. Brief competitors H&S, Emergency evacuation, Incident Reporting. Introduce named people for recognition	1. Event Manager 2. Key people to be up front	1. Finalize to ensure all actions are go and ready 2. Easier access for competitors on who to ask and report to.			
MORNING OF THE NEXT DAY	1. Reminder of H&S Advise any incidents that have occurred Update on rules etc.	1. Event Manager	1. Continual improvements advised and reminders to keep everyone safe			
POST EVENT	1. Debrief all aspects 2. Feedback from participants and others 3. Review for continuous improvement	1. Event Committee 2. Participants 3. Event Committee	1. Review for continuous improvement			



7.0 ATTACHMENTS

7.1 NOTIFIABLE EVENT: TO BE REPORTED TO WORKSAFE NZ

It will become a Notifiable Event e.g.

- ❖ Any death of a person, or
- ❖ A notifiable Injury or illness, or
- ❖ A notifiable event.

A notifiable injury requiring any person to have immediate treatment as an inpatient or for any of the following reasons:

- ❖ Any amputation of any part of the body
- ❖ A serious head injury
- ❖ A serious eye injury
- ❖ A serious burn
- ❖ The separation of the skin from underlying tissue (such as de-gloving or scalping), or
- ❖ Spinal Injury
- ❖ The loss of bodily function, or
- ❖ Serious Laceration.

There are new notification forms attached for completion when advising WorkSafe NZ. (See attachment 7.2).

NB: These reports must be kept for 5 years from the date of the incident.

*Also, from April 2015, Notifiable Occupational Diseases will need to be advised
Forms can be found: <http://www.business.govt.nz/worksafe/notifications-forms/nods>*



Examples of Notifiable Diseases that affect people's health are:

- ❖ Chemicals or metal fumes generated by work processes can cause breathing difficulties such as asthma.
- ❖ Solvents or glues used at work for painting, printing and building can cause skin allergies such as dermatitis, and can affect your nervous system.
- ❖ Repeated movements, constant muscle tension or lifting may cause an overuse disorder.

A notification alerts your workplace that a workplace activity may have caused harm. It ensures other employees/workers receive medical screening and if necessary treatment. Also, it helps to prevent other employees/workers being harmed.

A Notifiable incident means:

An incident in relation to a workplace that exposes the worker or any other person to a *serious risk to that persons health or safety arising from immediate or imminent exposure* to:

- ❖ An uncontrolled escape, spillage or leakage of a substance, or
- ❖ An uncontrolled implosion, explosion or fire, or
- ❖ An uncontrolled escape of gas or steam, or,
- ❖ An uncontrolled escape or pressurised substance, or
- ❖ Electric shock, or
- ❖ A fall or release from height of any plant, substance or thing, or
- ❖ The collapse, overturn, failure or malfunction of, or damage to, any plant that is required to be authorised by regulations, or
- ❖ The collapse or partial collapse of a structure
- ❖ And others



FORM OF REGISTER OR NOTIFICATION OF CIRCUMSTANCES OF ACCIDENT OR SERIOUS HARM

Required for section 25(1), (1A), (1B), and (3)(b) of the Health and Safety in Employment Act 1992. For non-injury accident, complete questions 1, 2, 3, 9, 10, 11, 14 and 15 as applicable.



1. Particulars of employer, self-employed person or principal: (business name, postal address and telephone number)

2. The person reporting is:

☐ an employer ☐ a principal ☐ a self-employed person

3. Location of place of work:

(shop, shed, unit nos., floor, building, street nos. and names, locality/
suburb, or details of vehicle, ship or aircraft)

4. Personal data of injured person:

Name:

Residential address:

Date of birth: DD / MM / YEAR Sex: (M/F)

5. Occupation or job title of injured person: (employees and self-employed persons only)

--

6. The injured person is:

☐ an employer ☐ a contractor (self-employed person)
☐ self ☐ other

7. Period of employment of injured person: (employees only)

☐ 1st week ☐ 1st month ☐ 1-6 months
☐ 6 months-1 year ☐ 1-5 years ☐ Over 5 years
☐ non-employee

8. Treatment of injury:

☐ None ☐ First aid only
☐ Doctor but no hospitalisation ☐ Hospitalisation

9. Time and date of accident/serious harm:

Time: (am/pm)

Date: DD / MM / YEAR

Shift: ☐ Day ☐ Afternoon ☐ Night

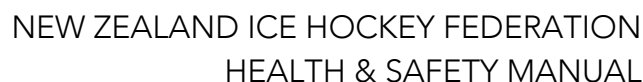
Hours worked since arrival at work:
(employees and self-employed persons only)

10. Mechanism of accident/ serious harm:

☐ fall, trip or slip ☐ heat, radiation or energy
☐ hitting objects with part of the body
☐ biological factors ☐ sound or pressure
☐ chemicals or other substances ☐ mental stress
☐ being hit by moving objects ☐ body stressing

11. Agency of accident/ serious harm:

☐ machinery or (mainly) fixed plant
☐ mobile plant or transport
☐ powered equipment, tool, or appliance
☐ non-powered handtool, appliance, or equipment
☐ chemical or chemical product
☐ material or substance
☐ environmental exposure (eg dust, gas)
☐ animal, human or biological agency
(other than bacteria or virus)
☐ bacteria or virus



☐ head ☐ neck ☐ trunk ☐ upper limb
☐ lower limb ☐ multiple locations
☐ systemic internal organs

- ☐ fatal
- ☐ fracture of spine
- ☐ other fracture
- ☐ dislocation
- ☐ sprain or strain
- ☐ head injury
- ☐ internal injury of trunk
- ☐ amputation, including eye
- ☐ open wound
- ☐ superficial injury
- ☐ bruising or crushing
- ☐ foreign body
- ☐ burns
- ☐ nerves or spinal chord
- ☐ puncture wound
- ☐ poisoning or toxic effects
- ☐ multiple injuries
- ☐ damage to artificial aid
- ☐ disease, nervous system
- ☐ disease, musculoskeletal system
- ☐ disease, skin
- ☐ disease, digestive system
- ☐ disease, infectious or parasitic
- ☐ disease, respiratory system
- ☐ disease, circulatory system
- ☐ tumour (malignant or benign)
- ☐ mental disorder

(a) Has an investigation been carried out? ☐ yes ☐ no

(b) Was a significant hazard involved? ☐ yes ☐ no

Date: DD / MM / YEAR

Name:
(capitals)

Position:
(capitals)



7.3 HOUSEKEEPING SAFETY INSPECTION REPORT

PROJECT/AREA:	Outside Surrounds	CONTRACTOR:		DATE:		TIME:	
INSPECTION TEAM							

RATING GUIDE

0 – 2	= CRITICAL	0% - 50%	= STOP WORK
3 – 4	= UNACCEPTABLE	51% - 74%	= CORRECT WITHIN 48 HOURS
5 – 6	= MARGINAL	75% - 84%	= CORRECT WITHIN GIVEN TIME FRAME (MAX. 72 HOURS)
7 – 8	= ACCEPTABLE	85% - 94%	= SUPPORT PERFORMANCE
9 – 10	= IDEAL	95% - 100%	= CONGRATULATE PERFORMANCE

	ITEM	TOTAL	SCORE	COMMENTS/ACTION	ACTION BY	DATE
1.	General cleanliness of area/facilities?	10				
2.	Rubbish containers available. Debris and/or rubbish present?	10				
3.	Oil/chemicals spills, leakage and/or used and controls in place?	10				
4.	Hazardous substance and all other containers labelled (MSDS)?	10				
5.	Controlled hazardous substance containers stored in area and/or outside compound?	10				
6.	Drains blocked and/or liquid puddles present?	10				
7.	Drain covers (plates/grills) in place and in good condition?	10				
8.	Adequate lighting for the work / playing activity and for access to the areas including emergency lighting?	10				
9.	Access to work areas safe, maintained and in tidy condition?	10				
10.	Plant and/or equipment labelled, safe, correct, clean and tidy?	10				
11.	Facilities maintained clean, tidy, and licensed?	10				
12.	Tools maintained, safe, clean, tidy and in working condition?	10				
13.	Emergency access clear. Equipment current, secure and signs displayed?	10				
14.	Electrical equipment: Safe, Secure, Signs, and Labelled?	10				
15.	Protective clothing: Available, Stored, Cleaned, Signage?	10				
	TOTAL	150				



HOUSEKEEPING SAFETY INSPECTION REPORT

PROJECT/AREA:	Exterior	CONTRACTOR:		DATE:		TIME:	
INSPECTION TEAM	As above						

RATING GUIDE

0 – 2	= CRITICAL	0% - 50%	= STOP WORK
3 – 4	= UNACCEPTABLE	51% - 74%	= CORRECT WITHIN 48 HOURS
5 – 6	= MARGINAL	75% - 84%	= CORRECT WITHIN GIVEN TIME FRAME (MAX. 72 HOURS)
7 – 8	= ACCEPTABLE	85% - 94%	= SUPPORT PERFORMANCE
9 – 10	= IDEAL	95% - 100%	= CONGRATULATE PERFORMANCE

	ITEM	TOTAL	SCORE	COMMENTS/ACTION	ACTION BY	DATE
1.	Wet and slippery areas, adequate signage "SLIPPERY WHEN WET"	10				
2.	Identify slippery area and address cause	10				
3.	Ambulance Bay is clear and has appropriate signage	10				
4.	Exterior exits are kept clear with appropriate signage	10				
5.	Pathways are clean and clear	10				
6.	Are there sufficient identified walkways in the car park?	10				
7.	Is the car park clearly marked out?	10				
8.	Are hazardous substances locked away?	10				
9.	Adequate lighting to all entrance ways	10				
10.	General cleanliness and tidiness of grounds and exterior facilities	10				
11.	Fire hose clearly visible and marked	10				
	TOTAL	110				



HOUSEKEEPING SAFETY INSPECTION REPORT

PROJECT/AREA:	Interior	CONTRACTOR:		DATE:		TIME:	
INSPECTION TEAM							

RATING GUIDE

0 – 2	= CRITICAL	0% - 50%	= STOP WORK
3 – 4	= UNACCEPTABLE	51% - 74%	= CORRECT WITHIN 48 HOURS
5 – 6	= MARGINAL	75% - 84%	= CORRECT WITHIN GIVEN TIME FRAME (MAX. 72 HOURS)
7 – 8	= ACCEPTABLE	85% - 94%	= SUPPORT PERFORMANCE
9 – 10	= IDEAL	95% - 100%	= CONGRATULATE PERFORMANCE

	ITEM	TOTAL	SCORE	COMMENTS/ACTION	ACTION BY	DATE
1.	Wet and slippery area, adequate signage 'SLIPPERY WHEN WET'	10				
2.	Adequate keep clear signs for busy areas (i.e. bar area)	10				
3.	Chemicals and cleaning materials stored in safe, locked area	10				
4.	Emergency action plan displayed in prominent places for fire evacuation and medical emergencies	10				
5.	Are visitors aware of exits and outside pre-determined assembly station in an evacuation emergency	10				
6.	Is your emergency evacuation procedure approved by the Fire Service?	10				
7.	Register for signing in visitors with Health and Safety Notice displayed at register	10				
8.	Are club members/administrators familiar with protocols for dealing with emergency situations?	10				
9.	Access ways clear at all times	10				
10.	First aid kit clearly displayed, regularly checked and restocked	10				
11.	Are there qualified first aid people in the club?	10				
12.	Report newly identified hazards	10				
13.	Keep written record of all incidents and accidents	10				
14.	Review incidents with corrective action being taken where appropriate	10				
	TOTAL	140				



HOUSEKEEPING SAFETY INSPECTION REPORT

PROJECT/AREA:	Arena / Rink	CONTRACTOR:		DATE:		TIME:	
INSPECTION TEAM							

RATING GUIDE

0 – 2	= CRITICAL	0% - 50%	= STOP WORK
3 – 4	= UNACCEPTABLE	51% - 74%	= CORRECT WITHIN 48 HOURS
5 – 6	= MARGINAL	75% - 84%	= CORRECT WITHIN GIVEN TIME FRAME (MAX. 72 HOURS)
7 – 8	= ACCEPTABLE	85% - 94%	= SUPPORT PERFORMANCE
9 – 10	= IDEAL	95% - 100%	= CONGRATULATE PERFORMANCE

	ITEM	TOTAL	SCORE	COMMENTS/ACTION	ACTION BY	DATE
1.	Are chemicals used stored and to NZS 8409: 2004 Standards	10				
2.	Machinery and tools isolated or securely stored [e.g. Zamboni, Tools, etc.]	10				
3.	Maintenance schedule for all machinery up to date Maintenance schedule up to date	10				
4.	Well stocked and maintained first aid kit available to the rink staff at all times	10				
5.	Provision of warning signs while ice resurfacing Danger keep off signage in place during and after ice resurfacing or surrounds	10				
6.	Warning signs to remain in place as recommended by provider or manufacturer	10				
7.	Notify participating players if resurfacing has recently been done as recommended by the provider or manufacturer	10				
8.	Clear access way available to ice surface and their surrounds at all times	10				
9.	Hand rails and shelters are secure and periodically checked	10				
10.	Appropriate signage warning of areas that are slippery when wet to rink surrounds	10				
11.	Are all agrichemicals used to NZS 8409:2004 standards	10				
12.	Is appropriate protective clothing available and used	10				
13.	Is an approved handler available when agrichemicals used	10				
14.	Agrichemical Manifest and use records	10				
	TOTAL	150				



HOUSEKEEPING SAFETY INSPECTION REPORT

PROJECT/AREA:	Event Risk Management Safety Guidelines	CONTRACTOR:		DATE:		TIME:	
INSPECTION TEAM							

RATING GUIDE

0 – 2	= CRITICAL	0% - 50%	= STOP WORK
3 – 4	= UNACCEPTABLE	51% - 74%	= CORRECT WITHIN 48 HOURS
5 – 6	= MARGINAL	75% - 84%	= CORRECT WITHIN GIVEN TIME FRAME (MAX. 72 HOURS)
7 – 8	= ACCEPTABLE	85% - 94%	= SUPPORT PERFORMANCE
9 – 10	= IDEAL	95% - 100%	= CONGRATULATE PERFORMANCE

	ITEM	TOTAL	SCORE	COMMENTS/ACTION	ACTION BY	DATE
1.	Weather conditions have been checked for the day Available Herald, Radio, Sky TV, Computer	10				
2.	Officials appointed	10				
3.	Match committee meeting	10				
4.	Ambulance Bay	10				
5.	Access to Rink	10				
6.	Warning Signs displayed	10				
7.	Players Responsibility	10				
8.	Alcohol	10				
9.	Smoking	10				
10.	Monitor and Review	10				
	TOTAL	100				