

# EVENT RISK CHECKLIST

<b>Event Location:</b>	<b>Inspected By:</b>	<b>Date:</b>
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Checklist	Compliance	Actions Required / Comments	Actions Required By	Date Required
<b>Objectives</b>				
1.	The event's goals, statements, objectives and performance indicators have been established and documented in business plans	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A		
2.	At a minimum, the below risks to objectives have been considered: <ul style="list-style-type: none"> <li>• Procurement issues</li> <li>• Corporate governance</li> <li>• Accountability</li> <li>• Non-compliance</li> <li>• Public and private relations</li> <li>• Loss of key personnel</li> <li>• Event approvals not obtained or received in time</li> <li>• Insurances unattainable</li> </ul>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A		
<b>Legal Aspects and Resources</b>				
3.	The WHS Act, WHS Regulation and other applicable legislation has been reviewed and complied with?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A		
4.	All necessary insurances are in place?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A		
5.	Staff and volunteer management, (e.g. staffing changes, rosters etc) have been planned for?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A		



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6.	Industrial relations issues for staff, contractors and the public have been assessed?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A			
7.	Training and inductions have been provided to all personnel involved in the event?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A			
8.	Protective equipment to safeguard against the sun and rain e.g. sun cream, sun protection, adequate structural protection, shade cover etc) has been provided?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A			
9.	Demographics have been assessed?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A			
10.	Contact with health, hospital, fire department, police, welfare, council, etc. has been undertaken and any issues resolved?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A			
11.	Medical services on site and fire services are on call?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A			
12.	Children and lost property procedures/processes have been established?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A			
13.	Medical and first aid provisions have been provided at the event's location?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A			
14.	Behaviour catalysts (e.g. music, alcohol, drugs, mass hysteria) has been assessed and planned for?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A			
15.	Security services are available and crowd control procedures are in place?						
16.	Consultations counselling and mediation processes have been established?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A			



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