

Event Management Plan Template

Event Name:

Date of Event:

Contact Name:

Contact Number:

A copy of the Event Management Plan should be retained by the event organiser for use on the day of the event.

### This template is not limited to the information contained and not all sections will be applicable to your event. Please provide any additional information that may assist with the management and planning of your event.

**Ref:** Doc Set ID

EVENT MANAGEMENT PLAN TEMPLATE


## Introduction

An Event Management Plan (EMP) helps event organisers carry out their legal duties in regards to the health and safety of participants. An EMP should identify and ensure plans are in place to manage foreseeable risks associated with the staging of the event.

Queanbeyan-Palerang Regional Council (QPRC) is committed to ensuring the health and safety for anyone staging and attending an event in the region.

# Expectations and commitments about events in Queanbeyan- Palerang

* QPRC expects all event organisers to complete an EMP.
* All stakeholders participate through consultation to deliver a safe and successful event.
* The ultimate goal is to stage a successful event with no harm to people or damage to the environment and property.
* Please consider equal access for all participants at your event.
* When completing the EMP please answer all questions. If the question is not applicable to your event please mark N/A.

Should you require any assistance completing the document, please contact the QPRC Events Team.

|  |
| --- |
| **Event Checklist** |
| **Item No.** | **Item** | **Completed** |
| 1.1 | Event Details |  |
| 1.2 | Contact during event |  |
| 1.3 | Road Closures |  |
| 1.4 | Security and Crowd Control |  |
| 2. | Insurance |  |
| 3. | Risk Assessment |  |
| 3.2 | Site Plan |  |
| 3.3 | Contingency Controls |  |
| 4. | Traffic, Parking and Pedestrian Management |  |
| 4.2 | Adjoining properties or affected parties |  |
| 5. | Incident Management |  |
| 6. | Public Health |  |
| 6.6 | Waste Management |  |
| 6.7 | Noise |  |
| 6.8 | People/Contractors |  |
| 7. | Public Safety |  |
| 8. | Event Promotion |  |
| 9. | Monitoring |  |
| 10. | Review |  |

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## Event Details

|  |
| --- |
| **Event Details** |
| Event |  |
| Event Type (indoor/outdoor) |  |
| Address of event |  |
| Event Details (List activities) |  |
| Date/Time Event Starts |  |
| Estimated number of people expected to attend |  |
| Estimated number of staff/volunteers to assist with event |  |

### Event Management Details

|  |
| --- |
| **Event Management Details** |
| Event Coordinator |  |
| Organisation or Group |  |
| Address |  |
| Phone |  |
| Email |  |

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### Road Closures

If your event requires the closure of any public roads, you will need to submit a Traffic Management Plan (TMP) to Council and the police which considers the impact on traffic, transport and pedestrians.

|  |
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| **Road Closures** |
| Will road/street closures be required? |  |
| If yes, what is the road/street name(s)? | 1.2. |
| Have the relevant authorities been contacted? |  |
| Has a permit been obtained? |  |
| If yes, List permit number |  |
| Have emergency services been notified? |  |
| Will traffic management be required? |  |

### Security and Crowd Control

|  |
| --- |
| **Security and Crowd Control** |
| Will security be needed for the event? |  |
| If yes, list details |  |

If a security firm has been hired, please provide details:

|  |
| --- |
| **Security firm Details** |
| Company Name |  |
| Licence Details |  |
| Contact Person |  |
| Phone |  |
| Email |  |
| Number of Security Personnel at Event |  |

#### Please attach the security and crowd control plan – if applicable

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## Insurance

### Insurance details

|  |
| --- |
| **Insurance Details** |
| Company Name |  |
| Address |  |
| Phone |  |
| Fax |  |
| Email |  |
| Policy Number and expiry date |  |
| Public Liability value and asset value |  |

**Please attach a copy of your insurance certificate/policy with minimum $20 million public liability.**

## Hazard Identification & Risk Assessment

It is your responsibility as the event organiser to ensure that foreseeable risks are identified and managed. There are a number of hazards associated with running an event. Use the template below to identify any potential risks and the actions taken to minimise or eliminate those risks. Examples of hazards might be vehicles moving on site, using gas, electricity, temporary structures, signage, wind or extreme temperatures

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When thinking about hazards and risks, consider the impacts these could have on the following categories:

* Operational - impact on services
* Human - people including staff and participants
* Financial and property - impact on budget, property damage
* Legal/Regulatory - breach of regulations and legal requirements
* Environmental - impact on the environment
* Stakeholder - negative publicity, public reactions

|  |
| --- |
| **CONSEQUENCE** |
| **Consequence** | **Description** |
| Minimal Impact | * No or minor degradation of services, scheduled interruptions or unscheduled interruptions for less than 2 hours
* No injury to persons or minor injuries requiring first aid treatment.
* No or minimal adverse public/staff reaction and/or no negative publicity
* Low financial loss <2% to 8% of budget for the area/project and/or minimal damage to property
* No or minimal environmental impact
* No or minimal regulatory breach
 |
| Low Impact | * Minor degradation of services and operations
* Minor injuries. Medical attention and several days off work
* Minor adverse public/staff reaction and/or minor negative publicity
* Minor financial loss from 8% to 15% of budget for the area/project and/or minimal damage to property
* Minimal environmental impact handled internally
* Minor regulatory breach
 |
| Moderate Impact | * Significant degradation of services and operations
* Extensive injuries requiring major medical treatment and/or long term illness.
* Significant adverse public/staff reaction and/or significant negative publicity
* Major financial loss from 15% to 20% of budget for the area/project and/or extensive repairs to property required
* Significant contained environmental impact EPA intervention
* Significant regulatory breach/s including court proceedings
* Widespread total degradation of operations and services
 |
| High Impact | * Loss of life, permanent disability or ill health.
* Extreme adverse public/staff reaction and/or major widespread negative publicity
* Significant/material financial loss greater than 20% of budget for the area/project and/or total destruction of property
* Significant widespread environmental impact, EPA intervention including significant fines
* Significant regulatory breach/s including court proceedings
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| **LIKELIHOOD** |
| **Likelihood** | **Description** | **Quantification** |
| Very Unlikely | May only occur in exceptional circumstances. No past event history. Could happen, but probably never will. | Once every 50 years or more. |
| Unlikely | The event could occur in some circumstances. No past event history. Could happen, but rarely. | Once every 25 years. |
| Likely | The event should occur sometimes. Some past warning signs or previous event history. Could happen at some time. | Once every 5-10 years. |
| Very Likely | The event will probably occurin most circumstances. Some recurring past event history. Could happen at any time. | Once a month or more frequently. |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Consequence** | High Impact | 1 | 1 | 2 | 3 |
| Moderate Impact | 1 | 2 | 3 | 4 |
| Low Impact | 2 | 3 | 4 | 5 |
| Minimal Impact | 3 | 4 | 5 | 6 |
|  | Very Likely | Likely | Unlikely | Very Unlikely |
| **Likelihood** |

|  |
| --- |
| **Key** |
| **STOP** | Task cannot commence until risk is eliminated, or reduced using control and treatment plan. |
| **CHECK** | Assess suitability of control measures and implement improved measures if possible. If measures cannot be improved, be alert and proceed with caution! |
| **GO** | Considered an insignificant risk. Task may commence using normal procedures. |

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# Hazard Identification and Risk Assessment

This structure for this hazard identification and risk assessment is based on AS/NZ ISO31000:2009 Risk Management

|  |  |  |  |
| --- | --- | --- | --- |
| Event Name |  | Date of Assessment |  |
| Date(s) or Event |  | Last Assessment |  |
| Location |  | Event Organiser |  |

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **1****Hazard Description** (before controls) | **2****Likelihood** Probability of hazard causing injury/loss(before controls) | **3****Consequence** Likely outcome severity (before controls) | **4****Risk rating** (before controls**)** | **5****Controls that will be evident to reduce the risk as far as is practicable** | **6****Likelihood** Probability of hazard causing injury/loss(after controls) | **7****Consequence** Likely outcome severity(after controls) | **8****Risk rating** (after contro ls) | **9****Who is responsible?** | **10****Initial and Date** |
|  |  |  |  |  |  |  |  |  |  |
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#### Site Plan

A site plan provides an overview of your event. It clearly shows where it will be staged, entrances and exits and placement of facilities and vendors/amusements etc.

All applications for public events must include a clearly marked site plan. For smaller events, a simple grid map is sufficient. For larger events, an aerial photograph with features clearly labelled can be used.

Tick the items after you have located and indicated them on the plan or place an x if the item is not relevant. All items in the right-hand column should be ticked for the emergency management plan.

The Site Plan should include the follow, if applicable:

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  |  |  |  |  |  |
| Vendor stall |  | No Alcohol areas |  | Emergency CoordinationCentre |  |
| All activities stall |  | Liquor outlets |  | Emergency vehicle entrances |  |
| Drinking water |  | Liquor consumption area |  | Emergency vehicle route on site |  |
| Event Coordination Centre |  | Restricted areas |  | Emergency or first aid parking |  |
| Information Centre |  | Entrances & Exits |  | Emergency Exits |  |
| First aid posts |  | Toilets |  | Fire extinguishers |  |
| Shelter |  | Parking |  | Emergency meeting points |  |
| Seating |  | Emergency Telephones |  | Water hydrant or static supplies |  |
| Temporary structures |  | Taxi and bus pick up |  | Map reference for venue |  |
| Mains power, water and gas |  | Location of entertainment |  | Electricity cables |  |
| Provision fordisabled people |  | Vehicle accesspoints |  | Lost children meetingpoint |  |
| Walking paths |  | Stage |  |  |  |

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**Example of a Site plan –** Large event, Queanbeyan Showground



#### 3.3 Contingency controls

|  |
| --- |
| **List the major influences (e.g. rain, extreme heat, storms, etc.) which may disrupt****your event and the contingency plans (e.g. cancel event, provide alternate venue or shelter) you will put in place.** |
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## Traffic, Parking and Pedestrian Management

#### Traffic, parking and pedestrian management plan

A traffic, parking and pedestrian management plan may be required to ensure the safe, effective and efficient movement of traffic and pedestrians on the road network in the vicinity of the event area.

Is there parking and access available for:

|  |  |  |  |
| --- | --- | --- | --- |
|  | **Yes** | **No** | **N/A** |
| Emergency Vehicles |  |  |  |
| Key stakeholders |  |  |  |
| Disabled patrons |  |  |  |
| General parking |  |  |  |
| Overspill of vehicles |  |  |  |
| Buses |  |  |  |
| Taxis |  |  |  |

#### Adjoining properties and affected parties

|  |  |  |
| --- | --- | --- |
|  | **Yes** | **No** |
| Have adjoining property owners/occupants and other affected partiesbeen contacted regarding this event? |  |  |

If the event is likely to impact in any way on these adjoining properties, e.g. noise, extra cars, road closures, it is highly recommended that you contact the owners/occupants well in advance of the event.

Tick below which method(s) you will use.

|  |  |  |
| --- | --- | --- |
|  | **Yes** | **No** |
| Flyer |  |  |
| Letter drop |  |  |
| Advertising in local paper |  |  |
| Door knock/face to face |  |  |
| Radio |  |  |

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**4.2 Other Hazards**

|  |  |  |
| --- | --- | --- |
|  | **Yes** | **No** |
| Will adjoining properties, structures or water bodies, pose additional risksto public and others? |  |  |

## Incident Management

#### Emergency Coordination Centre

Ensure the Emergency Coordination Centre is clearly marked on the site plan (refer section 3.2) and detail where First Aid will be supplied.

Ensure exit/evacuation points and fire extinguishers are clearly marked on the site plan.

#### Pre-event briefing and post event de-briefing

|  |
| --- |
| **How will event staff, volunteers and security be trained and given an induction prior to, at start of event and post event?** |
|  |
|  |
|  |

* 1. **Incident Management Plan including first aid arrangements**

|  |  |  |
| --- | --- | --- |
|  | **Yes** | **No** |
| Has an emergency response plan been developed and tested? Do allinvolved clearly know their roles? |  |  |

|  |  |  |
| --- | --- | --- |
| **Position** | **Name** | **Contact** |
| First Aid Officer 1 |  |  |
| First Aid Officer 2 |  |  |
| Incident Officer |  |  |
| Police |  |  |
| Ambulance |  |  |
| Fire |  |  |
| Security |  |  |
| Hospital |  |  |
| Council –Event Facilitator |  |  |
| Council – Environmental Health |  |  |
| Council – |  |  |

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* 1. **Firefighting equipment**

|  |  |  |
| --- | --- | --- |
|  | **Yes** | **No** |
| Will portable fire protection equipment be strategically located throughoutthe venue for initial attack of the fire by the public and/or safety officers? |  |  |

**Please indicate their location on the Site Plan**

* 1. **Fire danger period**

|  |  |  |
| --- | --- | --- |
|  | **Yes** | **No** |
| Has a day of total fire ban or fire danger period been considered? |  |  |

* 1. **Lost and stolen property / lost children**

|  |
| --- |
| **What arrangements have been made for lost or stolen property and/or lost children?** |
|  |
|  |
|  |

* 1. **Incident reports**

If there are any incidents that result in an injury or property damage this needs to be recorded in the following format similar to the Incident form on page 15

If a Notifiable Incident occurs, the event manager must contact WorkSafe on 132 360. The event manager must take immediate action to ensure:

* + - Nobody is in further danger
		- All injured people are taken care of
		- The site and any equipment involved in the incident is preserved and undisturbed unless movement is required to render first aid or make site safe.

Notifiable Incidents are:

* + - A death
		- A serious injury or injury requiring immediate medical treatment for including (but not limited to)
			* Broken bone
			* Laceration requiring stiches or gluing
			* Head or eye injury including loss of consciousness
		- An injury involving a substance that requires medical attention
		- An injury requiring admission as an in-patient to hospital
		- Collapse or other malfunction of registered plant
		- Collapse or failure of an excavation or shoring
		- Collapse of part or all of a building
		- Explosions and fires
		- Escape or spills of dangerous goods
		- The fall or release of plant, substances or objects from a height.

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#### Emergency and Media Spokesperson(s)

In the event of an accident or emergency, your organisation is likely to be contacted by the media for comment, either at the time, or afterwards.

It can be helpful to decide in advance, who is authorised; 1) to make decisions, and 2) speak on behalf of your organisation and to make sure that this information is conveyed to everyone involved in organising your event.

It can also be important to decide what your key messages will be in the event of an accident or emergency. These should include:

* + - The safety and wellbeing of event patrons and the public as a priority
		- Factual information about the emergency and steps being taken to address it.

Your organisation may decide not to make any comment, pending legal advice.

|  |  |  |  |
| --- | --- | --- | --- |
|  | **Name** | **Position/Organisation** | **Phone number** |
| Authorised to make emergency decisions |  |  |  |
| Nominated Emergency Spokesperson 1 |  |  |  |
| Nominated Emergency Spokesperson 2 |  |  |  |

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#### Incident Form

|  |  |  |  |
| --- | --- | --- | --- |
| **Date & Time of incident** | **Description of incident** | **Persons Involved (name, address, ph)** | **Action taken** |
| Date: |  | Name: |  |
| Time: | Address: |
|  | Suburb: |
|  | Phone: |
| Date: |  | Name: |  |
| Time: | Address: |
|  | Suburb: |
|  | Phone: |
| Date: |  | Name: |  |
| Time: | Address: |
|  | Suburb: |
|  | Phone: |
| Date: |  | Name: |  |
| Time: | Address: |
|  | Suburb: |
|  | Phone: |

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## Public Health

#### COVID Safety Plan

To complete your plan please go to the NSW Health website or contact QPRC Events team

|  |  |  |
| --- | --- | --- |
|  | **Yes** | **No** |
| Have you registered your COVID Safety plan? |  |  |
| Have you got your Event QR Code? |  |  |
| Have you got COVID signage? |  |  |
| Have you got a COVID Marshall? |  |  |
| Hand sanitiser stations in vulnerable location |  |  |
| Have you got COVID check in staff at the gate? |  |  |

#### Food providers

|  |  |  |
| --- | --- | --- |
|  | **Yes** | **No** |
| Will you or other vendors at the event be selling any food? |  |  |

List the food vendors and type of food provided:

|  |  |  |  |
| --- | --- | --- | --- |
| **Business/Vendor Name** | **Contact Phone** | **Type of Food** | **Council Permit** |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
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|  |  |  |  |
|  |  |  |  |

You will need to provide evidence of the vendor’s council permit for the operation of their stall.

#### Alcohol

|  |  |  |
| --- | --- | --- |
|  | **Yes** | **No** |
| Will there be alcohol at the event? |  |  |

**Please tick relevant box**

|  |  |  |
| --- | --- | --- |
|  | **Yes** | **No** |
| **BYO for consumption on site** - requires permit to consume from Liquorand Gaming NSW |  |  |
| **Tasting only** (can buy and take away unopened) - requires permit from Liquor and Gaming NSW |  |  |
| **Sell and consume on site** - Liquor Licence permit required from Liquor and Gaming NSW |  |  |

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#### Toilets

You will need to supply adequate facilities for the number of patrons attending your event. You should also consider people with disabilities.

|  |  |
| --- | --- |
|  | **How many toilets will be provided at the event?** |
| Male |  |
| Female |  |
| Disabled |  |
| Portable |  |

A cleaning schedule should be established for toilets. Toilets must be cleaned, restocked with supplied regularly.

Who will be responsible for the cleaning of toilets?

|  |  |
| --- | --- |
| **Name** | **Phone/Mobile** |
|  |  |

#### Water

Events must have sufficient supply of freely available, or at a nominal charge, potable water, and clear directional signage to water. Outdoor events that expose patrons to the elements must take due care for their health and comfort. A wash basin does not constitute a drinking fountain or tap.

|  |  |  |
| --- | --- | --- |
|  | **Yes** | **No** |
| Is the location of water signposted and marked on the site plan(refer 3.2)? |  |  |

|  |  |  |
| --- | --- | --- |
| **How will extra water be supplied to patrons on very hot days if needed?** | **Yes** | **No** |
| Bottled water |  |  |
| Tap water |  |  |
| Other |  |  |

|  |
| --- |
| **What is the source of water, i.e. reticulated/town water, tank, other?** |
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#### Shelter

Shelter and shaded areas should be available wherever patrons or staff and volunteers (including First Aiders) may be located for an extended period of time and where weather conditions dictate that it is required.

|  |
| --- |
| **Describe where shelter will be provided at the event. Mark on site plan (refer section 3.2)** |
|  |
|  |
|  | **Yes** | **No** |
| Will sunscreen be available at the event)? |  |  |

#### Waste management

All event organisers are responsible for the cleaning arrangements during and after an event. All premises used for the event must be left completely free of rubbish and debris.

|  |
| --- |
| **What arrangements do you have in place for managing garbage and recycling at your event?** |
|  |
|  |
|  |
| **How will garbage and recycling be contained at the event site? (e.g. bins, skips and existing street bins, etc)** |
|  |
|  |
|  |
| **How will garbage and recycling be removed and disposed of from the event site?** |
|  |
|  |
|  |

#### Other:

|  |  |  |
| --- | --- | --- |
|  | **Yes** | **No** |
| Has provision been made to deal with any discarded sharps or needles? |  |  |
| Will training been given to event personnel on handling or dealing withdiscarded sharps? |  |  |

* 1. **Noise**

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|  |  |  |
| --- | --- | --- |
|  | **Yes** | **No** |
| Refer 4.2 have persons who may be affected been advised? |  |  |

|  |
| --- |
| **Are there activities/mechanisms likely to create higher noise levels (than is typically present) at your event?** |
|  |
|  |
|  |
| **Describe how you will monitor and minimise these noise levels** |
|  |
|  |
|  |

#### People/contractors

The *Occupational Health and Safety Act 2004* requires that staff/people under the control of the event organiser are provided with information, training, instruction and supervision to perform the work they are doing at the event in a manner that is safe and without risk to health.

When considering outsourcing a service to a contractor, the following should be considered in your review:

**Previous Performance** - what experience do they have? How did they perform?

**Qualifications** - are they qualified and competent to deliver the tasks they are engaged to deliver?

**Commitment to Safety** – do they have a Safety Management Plan? Has their safety plan been audited? What were the results? What is their injury record?

**Cost** – the event organiser could have increased costs due to fines and penalties if lower safety standards of a contractor are accepted.

**Industry Standards** - what are the standard safety practices in the industry?

**Insurances** - do they carry appropriate workers’ compensation and public liability insurance?

**Understanding the task** - can the contractor demonstrate that they understand the tasks required and can they do so safely? This may require the contractor to submit a safety plan or safe work method statement.

**Sub-Contractors** - does the contractor intend on sub-contracting some of the functions? If so:

* What are the qualifications of the sub-contractors?
* Have they provided a job safety analysis or risk assessment?

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## Public Safety

#### Lighting and power

Adequate lighting is required for all events/venues including darkened events. Lighting should identify entry, exits and aisles, etc. Should electrical supply fail, auxiliary battery or generators should be on standby for powering lights and communication systems.

|  |  |  |
| --- | --- | --- |
|  | **Yes** | **No** |
| Do you require emergency power & lighting? |  |  |

If yes, it is recommended that an electrician be available for the event.

|  |  |
| --- | --- |
| **Name of Certified Electrician** | **Contact details during event** |
|  |  |

|  |
| --- |
| **Description emergency power and lighting systems** |
|  |
|  |
|  |

#### Temporary structures

Will there be temporary structures at the event? If yes, please indicate on the site plan (section 3.2) and provide details of size, etc.

|  |  |  |  |
| --- | --- | --- | --- |
|  | **Yes** | **No** | **N/A** |
| Stages and platforms |  |  |  |
| Break-away stage skirts |  |  |  |
| Seating |  |  |  |
| Marquess/tents |  |  |  |
| Is the area fenced off |  |  |  |

Have you submitted an application for a temporary structure(s)? Yes  No 

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#### AMUSEMENT STRUCTURES (INCLUDING INFLATABLE STRUCTURES)

|  |  |  |  |
| --- | --- | --- | --- |
|  | **Yes** | **No** | **N/A** |
| Amusements structures are not used or operated unless a current certificate of registration issued by WorkSafe |  |  |  |
| All structures have current certificate of inspection issued by a professional engineer and qualified electrician |  |  |  |
| Appropriate space and suitable ground surface is allocated for each ride, including access and egress for patrons |  |  |  |
| There is appropriate fencing surrounding rides |  |  |  |
| There is appropriate soft-fall area for inflatable structures |  |  |  |
| A thorough check of the inflatable structure and accessories is carried out prior to use (ensuring all anchor points, ropes and stakes or ballast are undamaged and fit for continual use) |  |  |  |
| All tie-down ropes attached to the device are fastened to adequate anchorages and there is adequate soft-fall area and appropriate fencing |  |  |  |
| Operator monitors prevailing wind conditions |  |  |  |

* 1. **Gas cylinders**

List all vendors who will be using portable gas cylinders.

|  |  |  |
| --- | --- | --- |
| **Name of Vendor** | **Phone** | **No. of Cylinders** |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
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#### Fireworks display

If fireworks are planned for your event, you are required to advise or obtain written approval from Work Safe NSW

|  |
| --- |
| **Fireworks** |
| Will there be a fireworks display? |  |
| If yes, has the ‘Notice to discharge fireworks’ been submitted by the Fireworks Provider? |  |
| Has a permit been obtained? |  |

If yes, please provide details:

|  |
| --- |
|  |
| Permit number |  |
| Person responsible for fireworks |  |
| Contact details during event |  |
| Phone |  |

Ensure restricted zones are marked on the site plan (refer section 3.2).

## Event Promotion

#### Ticketing

|  |  |  |
| --- | --- | --- |
|  | **Yes** | **No** |
| Are there tickets for the event? |  |  |

**Advertising promotion**

Event promotion may affect the quantity and variety of people attending.

|  |  |
| --- | --- |
| **Has the event been advertised via Yes** | **No** |
| TV |  |  |
| Paper |  |  |
| Radio |  |  |
| Social Media |  |  |

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EVENT MANAGEMENT PLAN TEMPLATE


#### Signage

Signs are provided for easy identification of the following:

|  |  |  |  |
| --- | --- | --- | --- |
|  |  |  |  |
| Phones |  | Parking – Cars, buses, disabled,taxi |  |
| Entrances |  | Information/Communication |  |
| Exits |  | Rules relating to alcohol consumption |  |
| Toilets |  | Lost and found |  |
| Water |  | Public transport pickup/set down |  |
| First aid/Emergency CoordinationCnetre |  | Security |  |
| Camping areas and facilities |  | No Smoking |  |
| Animals |  |  |  |

#### Health Promotion

Have you considered health promotion material, for example:

|  |  |  |  |
| --- | --- | --- | --- |
|  |  |  |  |
| Glass containers are not permitted |  | Smoke free event |  |
| Bags and Eskies will be searched |  | Public Transport will be available |  |
| Don’t drink and drive |  | Food and snacks will beavailable… |  |

## Monitoring

Have personnel been appointed to monitor:

|  |  |  |
| --- | --- | --- |
|  | **Yes** | **No** |
| Public behaviour within the event? |  |  |
| Stall holders compliance to event requirements? |  |  |
| Staff and volunteer compliance to event requirements? |  |  |

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EVENT MANAGEMENT PLAN TEMPLATE


## Review

At the conclusion of your event it is important to evaluate the event against the aims and objectives. This will allow you to identify and make appropriate changes, where necessary, to your event management plan to ensure the success of a future event.

#### Unscheduled Occurrences

|  |
| --- |
| **Description of occurrence and outcome** |
|  |
|  |
|  |
|  |
|  |
|  |
| **Future management strategy to prevent repeated occurrence** |
|  |
|  |
|  |
|  |
|  |
|  |

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