



LIONS CLUB OF _____ INC.

WHS DOCUMENTS

KIT NO. -

GIVEN TO -

DATE -

PROJECT -

Please return to _____ Mobile _____

CONTENTS.

1. **Duties/Functions/Responsibilities.**
2. **Project Pre Planning Form.**
3. ***Sign On Sheets***
4. **Hazard Inspection Check List.**
5. **Emergency Action Guide.**
6. **Incident Accident Response Form.**
7. **Internal Prohibition Notice [I.P.N.].
Operating Procedure **[under review]****
8. **I.P.N. Notice**[under review]**
Forms/Sheets from previous Project.**
9. **First Aid Certificate Holders.**
10. **Project Specific Information.**
11. **Food Handling Guide & Info.**
12. **Programmer's Mailing Envelopes.**

These documents are available to download from the Lions Tasmania website.
201t1@lions.org.au

To access go to Lions Login box and follow the prompts.
Password is your member number.

Then select

- Members Area
- Safety Officer Optional Docs

And download

DUTIES / FUNCTIONS / RESPONSIBILITIES.

Club OHS Officer.

- Ensure Project Officers/Leaders are provided with necessary OHS documentation prior to the project implementation.
- Adapt procedures & documentation as experiences dictates.
- Peruse completed documentation to ensure any items raised are followed up & procedures changed as necessary.
- Ensure all the necessary safety equipment is up to date & operational.
- Provide “training” as required.
- Follow through PIN process to finalisation.

Project Leader/Co-ordinator.

- Ensure a complete set of OHS documentation is on hand prior to project commencement.
- For larger projects (eg Day on the Beach) appoint a separate Project OHS Officer.
- All members & other project helpers are signed on & aware of their responsibilities.
- All equipment required for the project is available & in good working order.
- All the necessary safety equipment is available & operational.
- Apply PIN process if necessary.
- For “Sausage Sizzle” projects ensure that –
 - the money handling & the food preparation, cooking & selling activities are kept separate both physically and functionally.
 - the “Food Safety Information Council” guidelines on food safety are followed.



LIONS CLUB OF _____ INC.

District 201 T1

PROJECT PRE PLANNING:

The Nominated Project Leader (Coordinator) has the role to ensure that all Preparations & Permits are organised well prior to the event / work bee. Good prior organisation is a must for a Safe Working Environment. Personal accident coverage includes all Lions, Leos, Lionesses, accompanying partners and Voluntary workers whilst attending any officially constituted Lions activity or meeting.

Project Details (Project Officer to complete prior to the day of project / event)

- Project Details: _____

- Date (include total hours) _____

- Work Location: _____

- Planned Tasks (Lions Club responsibility):

1) _____

2) _____

3) _____

4) _____

5) _____

- Is the activity Club Board Sanctioned? Yes / No.

- Has the Job Safety Analysis check been completed? Yes / No.

- Have all members and volunteers been briefed on their duties? Yes/ No

- Council and other permits required:

1) Type. _____ Obtained: Yes/ No.

2) Type. _____ Obtained: Yes/ No.

3) Type. _____ Obtained: Yes/ No.

4) Type. _____ Obtained: Yes/ No.

- Project Officer: _____ Signature

- Safety/ Security Officer: _____ Signature.

(It is advisable that the Safety/Security Officer has only one duty for the duration of the project.

The Safety (Security Officer) for the project is nominated by the Project Officer. On smaller Club projects the Project Officer and the Safety/Security Officer could be the same person)

- First Aid Officer/s: _____ Signature.



LIONS CLUB OF _____ INC.
OH&S RECORDING

SIGN ON SHEET 1. (Each participating Club Member / Partner / Volunteer)

I have been briefed on the scope of the project and understand my duties.

Project.....Date.....

1. Full Name: _____	Signature: _____	Start & Finish Times _____
2. Full Name: _____	Signature: _____	Start & Finish Times _____
3. Full Name: _____	Signature: _____	Start & Finish Times _____
4. Full Name: _____	Signature: _____	Start & Finish Times _____
5. Full Name: _____	Signature: _____	Start & Finish Times _____
6. Full Name: _____	Signature: _____	Start & Finish Times _____
7. Full Name: _____	Signature: _____	Start & Finish Times _____
8. Full Name: _____	Signature: _____	Start & Finish Times _____
9. Full Name: _____	Signature: _____	Start & Finish Times _____
10. Full Name: _____	Signature: _____	Start & Finish Times _____
11. Full Name: _____	Signature: _____	Start & Finish Times _____
12. Full Name: _____	Signature: _____	Start & Finish Times _____
13. Full Name: _____	Signature: _____	Start & Finish Times _____
14. Full Name: _____	Signature: _____	Start & Finish Times _____
15. Full Name: _____	Signature: _____	Start & Finish Times _____
16. Full Name: _____	Signature: _____	Start & Finish Times _____
17. Full Name: _____	Signature: _____	Start & Finish Times _____
18. Full Name: _____	Signature: _____	Start & Finish Times _____
19. Full Name: _____	Signature: _____	Start & Finish Times _____



HAZARD INSPECTION CHECK LIST

Version.....20-03-2013

' S ' denotes Satisfactory, ' U ' denotes Unsatisfactory !

Table with 6 columns: Risk Area, S, U, Hazard Description, Corrective Action Taken, Comments. Rows include sections for Work / Task Area, Personal Protective Equipment, and Amenities.

' S ' denotes Satisfactory, ' U ' denotes Unsatisfactory !

Risk Area	S	U	Hazard Description	Corrective Action Taken	Comments
"First Aid"					
First Aid Kit / Facility on hand, maintained and up to date					
Stocks o/h suit requirements					
Qualified 1st. aiders names & contact means displayed					
Qualified 1st. aiders - Certificates are current.					
Means of Emergency Call are available and shared.					
"Fire Control"					
Fire fighting Equipment in "Current Serviced" Status, tagged, visible, signed & accessible					
Appropriate types of Extinguishers & Signage					
Exits Clearly Marked & Clear of Obstructions & Functioning					
Smoking / Naked Flame restrictions observed.					
Minimum quantities of flammable materials at workstation					
Emergency Call facility identified & working					
Emergency Process & Drill designed & practiced & displayed					
Gas Appliances / Cylinders - Current Certif. In good working order, no leaks					
"Food & Beverage"					
Food cooking & handling procedures adhered to - Meeting standards. See full Info. If unsure.					
Barbecues clean & in good working order - located & assembled safely					
) are located within Regulation Distances from flammable walls & materials					
Food storage facilities appropriate to process & products on hand					
Hygiene - Utensils/equip. wash up facilities in place & adequate					
Hygiene - Personal / Hand wash facilities in place & adequate.					
Hygiene - Food remains covered after prep. pre cooking.					2

' **S** ' denotes Satisfactory, ' **U** ' denotes Unsatisfactory !

Risk Area	S	U	Hazard Description	Corrective Action Taken	Comments
Food Quality Gloves available & mandatory use - food handling.					
Waste Disposal - adequate & hygienic					
Hot Food storage at or above "Correct Minimum" Temperture ?					
Cold Food storage at or below "Correct Maximum" Temperature ?					
"Equipment & Tools"					
Tools & equipment suitable for intended tasks.					
Tools & equipment all in safe working condition					
Users of Tools & Equipment are competent & using correctly					
Electrical tools & equipment - Tested & tagged, current.					
Electrical supply via RCD Safety Switch or RCD Cct. Brkr.					
Equipment / structures - correctly assembled, set up & working as intended.					
Tents, Barbecues, Tables, Umbrellas, etc. correctly assembled, tied down & safe - Extra care for windy environments.					
"Parking & or Traffic Control Meas."					
"Risks to Public - Passing or Patrons"					



LIONS CLUB OF

District 201 T1

INC.

EMERGENCY ACTION GUIDE

Lions Australia Insurance Brokers Representative: R.N. (Bob) Korotcoff P.O Box 454, Brighton South Australia 5048. Telephone (H&W) (08) 8298 1599 Facsimile: (08) 8377 0798. Email: insurance@lions.org.au Web: www.lionsinsurance.com.au

The club must advise our insurer's representative that an accident has occurred as soon as practicable (and no later than 30 days). He will send a special claim form to the Club Secretary for completion. If the injury is serious, it is advisable that notification is given by telephone or facsimile indicating the name of the injured person and the nature of the injuries.

Attached:

- Incident/Accident (including near misses) Reporting Form (Lions Club of Kingborough).

Lions Club (Underwriters) Claim Forms:

- Personal Accident
- General Claim (Loss by Burglary and Theft)
- Motor Vehicle Re-imburement of excess

A copy of each Incident/Accident report should be forwarded to the Insurance Brokers Representative.

IN ALL CASES DO NOT ADMIT LIABILITY.

We are not qualified to give advice on Insurance matters. If in doubt on the correct procedure contact the Insurance Brokers Representative. Tele. No. as above. The particular circumstance can then be handled promptly. Processes in handling injury and property damage claims vary for Members / Partners and members of the public. In every case the incident must have occurred at an authorised Lions Club controlled event.

INCIDENT / ACCIDENT RESPONSE

The primary objective of the response is to ensure the safety of all Lions Club Members / Partners, volunteers and members of the public. Our immediate response will be firstly to ensure that the site is made as safe as possible and that any injured person is appropriately cared for.

Each incident or accident will have circumstances and situations that are specific to it. There has to be some room for the responsible person to use their best judgement (use common sense) in determining how to respond to that particular situation or circumstance. Consult with others who may have specialist knowledge relevant to the situation.

- 1) Take control of the situation, access the site of the incident and assess the potential for further injury and/or damage.
- 2) Secure the site, control access to the site and as far as is reasonably possible ensure that potential for injury/damage is removed or adequately controlled.
- 3) In cases of injury, ensure that the injured person is properly cared for before doing anything else. Make arrangements for any necessary medical treatment.
- 4) Contact the relevant emergency services where necessary. On their arrival, allow them to assume control of the site.
- 5) Contact the Club President.
- 6) Contact the Insurance Brokers Representative.

Incidents / Accidents requiring 1st. Aid as a minimum, or a Near Miss with Serious Injury potential must be reported to Workplace Standards Tasmania.



LIONS CLUB OF

District 201 T1

INC.

Club Address:

We Serve

Incident / Accident Reporting Form

(To be completed as soon as possible after the event)

Date:

Personal Details of the Injured Person

Surname:

Given Names:

Sex (M or F):

Date of Birth:

Description of Occurrence of Injury:

Date Incident Occurred:

Date Incident Reported:

Time Incident occurred:

How did the injury occur ?

(Include name of any chemical, product, process or equipment involved)

Are you reporting a Near Miss Event ?

Yes

No

Witness(es) – Did anyone else see the incident ?

Yes

No

Full Name of Witness / s)



LIONS CLUB OF

District 201 T1

INC.

Club Address:

We Serve

Contact Info.

Nature of the Injury (for example: Sprain, cut, burn, etc)

Bodily location of Injury (eg. Black, eye)

Did Injured person seek medical treatment following accident?
Yes
No
Where was treatment provided ?
Date of Treatment:
Is further treatment required ?

Injured Person's Signature:
.....
What action (could be/has been) taken to avoid a repetition of this type of injury ?

Project Officer:
Name
Signature
Date

FIRST AID CERTIFICATE HOLDERS.

Level 1.

Level 2.