



## **EAST COAST BAYS ASSOCIATION FOOTBALL CLUB**

BAY CITY PARK, ANDERSONS ROAD, P.O. BOX 35-761, BROWNS BAY. PHONE/FAX (09) 478-3433  
www.ecbafc.co.nz    ecbafc@xtra.co.nz

### **POLICY – HEALTH AND SAFETY**

#### **RATIONALE**

The Control Board of East Coast Bays Association Football Club are required to:

- a) Provide safe physical and emotional environments for players, coaches, convenors, parents and spectators
- b) Comply with any legislation currently in force or that may be developed to ensure the safety of players, coaches, convenors, parents and spectators.

#### **INJURIES**

##### **PURPOSES**

- a) To provide adequate attention for all children to be attended to following accident or sickness at the club or other allocated fields.
- b) To ensure that a programme of basic first aid is made available to club coaches.
- c) To provide forms to record all injuries and attention given

##### **GUIDELINES**

- a) Control Board to consult regarding concerns of health and wellbeing of players and to follow up on an recorded injuries. First Aid supplies to be budgeted for and regularly replaced before expiry date.
- b) First Aid supplies to be accessible at all times, in clubrooms other allocation fields and tuckshop.
- c) Coaches are responsible for ensuring that all accidents/injuries during games are attended to.

- d) In the event of serious injury, if parent not available, players to be taken to North Shore Hospital or an ambulance called.
- e) Head Injuries: Parents to be informed immediately and players prohibited from playing for 2 weeks.
- f) Toilets for physically handicapped available in the clubrooms, access by ramp from the fields.



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### **POLICY – FIRE AND EARTHQUAKE EVACUATION PROCEDURES**

#### **RATIONALE**

All membership have sound knowledge of the procedures for evacuation during fire or earthquake emergency.

#### **PURPOSES**

- a) To ensure all membership members are aware of the correct procedures and requirements when following a Fire and Earthquake Drill
- b) To inform all membership members what is required of them during an emergency drill if they are present at the club
- c) To provide written guidelines and regular fire drills to ensure everyone is aware of the correct procedure.

#### **FIRE/EARTHQUAKE**

**Fire Service must be notified immediately in the event of a fire.**

- a) On hearing the alarm, for example, **CONTINUOUS RINGING**, all persons will cease what they are doing and move out of the clubrooms in an orderly manner.
- b) Fire Warden to notify Fire Department
- c) Fire Warden to check and make sure that all buildings are clear. Fire Warden to wear bright yellow vest
- d) All persons to assemble in top carpark to await Fire Department.
- e) Only if conditions permit, should an attempt be made to extinguish the fire.

*In the case of an Earthquake*

- e) Building Warden to make sure all electricity is turned off at the mains. If a water pipe bursts in an earthquake turn off water supply.
- f) In the case of an earthquake persons to crouch under tables or in a doorway.
- g) Once shaking has stopped everyone to vacate as per fire drill and assemble on to field.
- h) Warden to check buildings again if safe.
- i) Dismissal of the area may only be taken upon consent of Warden

**In the event of actual earthquake, list to the radio for further information**



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### **HEALTH AND SAFETY**

#### **APPENDIX – IDENTIFYING HAZARDS**

##### **Access and Egress**

Clearly marked  
Doors able to be opened from inside without keys  
Unobstructed accessways with ample width

##### **Amenities**

Kitchen – hot and cold water, cupboards with cutlery  
Toilets – clean  
Soap and Dryer provided

##### **Gas Bottles**

Secure Storage  
Labelling  
Ventilation  
No Smoking signage where appropriate  
Proper Handling

##### **First Aid**

Accessible  
Clean and not expired  
First Aid Person Available  
Accident Report Register

##### **Floors**

Clean, free of tripping hazards  
Drainage  
Sound construction  
Even surface.

##### **Housekeeping**

All areas kept tidy, clean and orderly

**Lighting**

Adequate lighting  
All bulbs working

**Machines**

Safe and stored promptly

**Noise**

No excessive noise

**Seating**

Appropriate

**Thoroughfares**

Clear of obstruction

**Storage**

Safe stacking of furniture and other resources

**Ventilation**

Adequate ventilation in all areas.

**Fire**

Emergency procedures in place  
Fire Extinguishers  
Exits clearly marked  
Fire doors where needed.

**Electricity**

Annual check of all electrical equipment  
Cords of a safe length and not a tripping hazard

**Accident Report**

All accidents recorded in a register  
All serious harm accidents to be investigated and a written report  
All serious harm accidents to be notified to **OSH**

**Training and Supervision**

Suitable training for suitable number of people each year for First Aid Certificate  
Membership to be aware of hazards and dangers

**FIRST AID PRECAUTIONS**

1. Wash your hands before and after treatment for cuts and abrasions.
2. Make sure all cuts on your hands is covered with waterproof dressings before treatment.

3. Avoid skin contact with blood and body fluids
4. Use disposable gloves if skin contact with blood or body fluid is likely. Use paper towels to clean up blood or body fluids.
5. Soiled surfaces to be disinfected.
6. Place contaminated material, including gloves, in a plastic bag for safe disposal.

### MINIMUM FIRST AID REQUIREMENTS

1 Pkt	Chux Liners
2	7.5 x 1.6 Handycrepe bandages
1 Tube	Antiseptic cream
1 Roll	First aid adhesive tape
10 tubes	Sodium chloride liquide
2 Pkts	Dressing strip
2 Pkts	50 Bandage strips
1 Pkt	Optrex eye lotion
1 Tube	Antihisan cream (for itches)
2 prs	Scissors
1 Pr	Tweezers
1 Pr	Splinter forceps
5	10 x 10 cm sterile dressings
10	5 x 5 cm sterile dressings
1	First aid manual
1 Pkt	Latex medium gloves
1	Termometer
1	Finger bandage with applicator
1 Pkt	Panadol clear
1 Bottle	Thymol Glycerin mouthwash
1 Pkt	Safety pins
1	Trangular bandage
1 tin	10 x 10 cm paraffin gauze
1	Sterile eye pad
1 tube	Sunscreen
1 Bottle	Insect repellent
1	Measuring cup
	Paper towels
	Rubbish bin
	Bowl

All travelling teams must carry comprehensive First Aid Kit and an adult delegated to take care of this duty.

# RISK ASSESSMENT FORM

The form is used by the provider to help assess the potential risks of the venue that is being considered for use as the NZF Talent Centre and Skills Centre Venue.

## 1. LOCATION - SETTING THE SCENE

Location	Division
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Area / Activity / Person: 2020/21 ECB Skill Centre - Ashley Reserve, Long Bay, Auckland

## 2. IDENTIFYING HAZARDS - WHAT CAN GO WRONG AND WHO WILL BE AFFECTED?

Hazard	Something with the potential to cause harm	Person at Risk		
A	Slip trip, fall or harm when playing football	Staff <input checked="" type="checkbox"/>	Player <input checked="" type="checkbox"/>	Other
B	The portable goals	Staff	Player <input checked="" type="checkbox"/>	Other
C	Exposure to the sun (sunburn)	Staff <input checked="" type="checkbox"/>	Player <input checked="" type="checkbox"/>	Other
D	Moving cars in the car park area	Staff <input checked="" type="checkbox"/>	Player <input checked="" type="checkbox"/>	Other <input checked="" type="checkbox"/>
E	Exposure to Covid	Staff <input checked="" type="checkbox"/>	Player <input checked="" type="checkbox"/>	Other

## 3. EXISTING CONTROL MEASURES - WHAT PRACTICAL STEPS ARE ALREADY IN PLACE?

Hazard	Existing Control Measures
A	Grounds are maintained by Council, Monitoring by on-site coaches of area and behaviour, first aid kits,
B	There is no 'winging' or climbing of the goals - monitored by on-site coaches,
C	Players are reminded to bring water to drink, wear suitable clothing and apply sunscreen, sessions are in the evening,
D	Cars travel at slow speeds, parents are encouraged to pick their child up from the sports field,
E	Players and Coaches to be aware of Covid Codes for Ashley Reserve.

## 4. EVALUATING RISK - NOT 'WORSE CASE SCENARIO', TAKES INTO ACCOUNT EXISTING CONTROLS

Hazard	Consequence (1-5)	x	Likelihood (1-5)	=	Risk Rating (1-25)
A, B	Minor Medium		Likely Unlikely	=	8-Medium 6-Medium
C, D	Non-significant Minor		Almost Certain Unlikely	=	5-Medium 3-Minor

## 5. RISK PRIORITISED ACTION PLAN - APPLY CONTROLS: E=ELIMINATE, I=ISOLATE, M=MINIMISE

Hazard	E/I/M	Practicable Steps required to further control risk	Responsibility
A	I, M	Ensuring that no use of child equipment, particularly goal supports	Coaches
B	M	Talk to Council about speed bumps being installed in the car park	ECB Admin
A	M	Coaches define ground rules to minimise harm due to 'trial play'	Coaches
E	M	Coaches and Staff follow Club Covid/Protocol	Coaches

## 6. FURTHER INFORMATION: CROSS-SECTOR SAFETY RESPONSIBILITIES

Who is responsible for local monitoring? ECB Admin, Coaches & Football Development Manager (Junior coaching director)

Is further competent (clinical risk, manual handling) advice required? Yes / No Comments: No

Do third parties (agencies) require a copy of this risk assessment for their safety? Yes / No Comments: No

## 7. ASSESSMENT SIGN-OFF: ASSESSMENT MONITORING RESPONSIBILITIES

Assessor's Name: Liam Satchell

Assessor's Signature:

Date of Assessment: 24 10 20 Review: Daily Weekly (tick one)

Reassessment Date:

Manager's Signature: Monthly

Notes: Please also see the attached list of identified hazards and risk matrix used for the assessment.

Risk rating has been assessed based on selection of a credible and foreseeable consequence and the likelihood of that harm occurring.

# RISK ASSESSMENT FORM

## APPENDIX 4

The form is used by the provider to help access the potential risks of the venue that is being considered for use as a training and game venue at East Coast Bays A.F.C

### 1. LOCATION - SETTING THE SCENE

Location	Division
----------	----------

Area / Activity / Person: **East Coast Bays A.F.C; 54 Andersons Road, Browns Bay, Auckland, New Zealand**

### 2. IDENTIFYING HAZARDS - WHAT CAN GO WRONG AND WHO WILL BE AFFECTED?

Hazard	Something with the potential to cause harm	Person at Risk		
A	Slip trip, fall or harm when playing football	Staff <input checked="" type="checkbox"/>	Player <input checked="" type="checkbox"/>	Other
B	The portable goals	Staff	Player <input checked="" type="checkbox"/>	Other
C	Exposure to the unstable fence	Staff <input checked="" type="checkbox"/>	Player <input checked="" type="checkbox"/>	Other
D	Moving cars in the car park area	Staff <input checked="" type="checkbox"/>	Player <input checked="" type="checkbox"/>	Other <input checked="" type="checkbox"/>
E	Exposure to Covid	Staff <input checked="" type="checkbox"/>	Player <input checked="" type="checkbox"/>	Other <input checked="" type="checkbox"/>

### 3. EXISTING CONTROL MEASURES - WHAT PRACTICAL STEPS ARE ALREADY IN PLACE?

Hazard	Existing Control Measures
A	Grounds are maintained by Council, Monitoring by on-site coaches of area and behaviour, first aid kits.
B	There is no 'swinging' or climbing of the goals - monitored by on-site coaches.
C	Players and coaches to be aware to avoid the fence area.
D	Cars travel at slow speeds, parents are encouraged to pick their child up from the sports field.
E	Players and Coaches to be adhere to Club Covid Codes for Ashley Reserve; track and tracing protocols.

### 4. EVALUATING RISK - NOT 'WORSE CASE SCENARIO', TAKES INTO ACCOUNT EXISTING CONTROLS

Hazard	Consequence (1-5)	x	Likelihood (1-5)	=	Risk Rating (1-25)
A B	Minor Medium		Likely Unlikely	=	8-Medium 6-Medium
C D	Non-significant Major		Almost Certain Unlikely	=	5-Medium 8-Medium

### 5. RISK PRIORITISED ACTION PLAN - APPLY CONTROLS: E=ELIMINATE, I=ISOLATE, M=MINIMISE

Hazard	E / I / M	Practicable Steps required to further control risk	Responsibility
D	I / M	Coaching staff to be aware of child movement, particularly post session.	Coaches
D	M	Talk to Council about speed bumps being installed in the car park.	HCB Admin
A	M	Coaches behavioural ground rules to minimise harm due to 'foul play'	Coaches
A	M	Admin to advise coaches, players and spectators of club covid protocols	Coaches
A	M	Council to dismantle fence and remove from site	Coaches

### 6. FURTHER INFORMATION: CROSS-SECTOR SAFETY RESPONSIBILITIES

Who is responsible for local monitoring? **East Coast Bays Admin, Coaches and Coaching Director**

Is further competent (clinical risk, manual handling) advice required? Yes / No Comments: **No**

Do third parties (agencies) require a copy of this risk assessment for their safety? Yes / No Comments: **No**

### 7. ASSESSMENT SIGN-OFF: ASSESSMENT MONITORING RESPONSIBILITIES

Assessor's Name: **Liam Sands**

Assessor's Signature:

Date of Assessment: **24 10 20** Review: Daily  Weekly  (tick one)

Reassessment Date:

Manager's Signature: **Monthly**

Notes: **Please also see the attached list of identified hazards and risk matrix used for the assessment.**

**Risk rating has been assessed based on selection of a credible and foreseeable consequence and the likelihood of that harm occurring.**