



GREATER
DANDENONG
City of Opportunity

Sport and Recreation

After Hours Contacts and

Incident Procedures



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Introduction

This document outlines the steps to be taken for the following services:

- Community Property Facilities
- Sport and Recreation Facilities
- Aquatic and Leisure Facilities

The *After Hours Contact Procedures* outlines the actions required following an after-hours call from a member of the public in relation to a first aid incident, building / structural incident, access issue or significant event.

This document consists of two main components:

- After Hours Contact Procedures
- Incident Procedures

After Hours Contact Procedures

Community Property Facilities

- **Building Maintenance/Access issues: 8571 1000**

Sport and Recreation Facilities

- **Building Maintenance/Access issues: 8571 1000**

Facilities

The following is a list of sports grounds located within the City of Greater Dandenong.

Dandenong

- Dandenong Park, Pultney St, Dandenong
- Fotheringham Reserve, Alexander Ave, Dandenong
- George Andrews Reserve, Trewin Street, Dandenong
- Greaves Reserve, Bennet St, Dandenong
- Mills Reserve, Cleeland St, Dandenong
- Robert Booth Reserve, Clow St, Dandenong
- Shepley Oval, Pultney St, Dandenong
- Thomas Carroll Reserve, Box Street, Dandenong

Dandenong North

- Lois Twohig Reserve, Carlton Rd, Dandenong North
- Lyndale Secondary College, Halton Rd, Dandenong North

Endeavour Hills

- Police Paddocks, Brady Road, Endeavour Hills (managed by CGD)

Keysborough

- Coomoora Reserve, Coomoora Rd, Keysborough
- Frederick Wachter Reserve, Bloomfield Rd, Keysborough
- Keysborough College - Acacia Campus, Isaac Rd, Keysborough
- Keysborough Community Park (KPR), Loxwood Ave, Keysborough
- Keysborough Reserve, Sunnyvale Cres, Keysborough
- Tatterson Park, Cheltenham Rd, Keysborough



Noble Park

- Noble Park Reserve, Moodemere St, Noble Park
- Noble Park Secondary College, Callaghan St, Noble Park
- Parkfield Reserve, Dunblane Rd, Noble Park
- Ross Reserve, Memorial Drive, Noble Park
- Yarraman Primary School, Liege Ave, Noble Park

Noble Park North

- Barry Powell Reserve, Halton Rd, Noble Park North

Springvale

- Edinburgh Reserve, Edinburgh Rd, Springvale
- Norman Luth Reserve, Heritage Dr, Springvale
- Springvale Reserve, Newcomen Rd, Springvale
- Warner Reserve, Flynn St, Springvale

Springvale South

- Alex Nelson Reserve, Harold Rd, Springvale South
- Keysborough College - Banksia Campus, Wardale Rd, Springvale South



Aquatic and Leisure Facilities

- **General Enquiries**

Callers to be advised to contact:

Relevant Centre as per phone number listed below on the next working day

- **Access and Maintenance Issues**

Relevant Centre Managers as per mobile numbers listed below

Dandenong Oasis:

Corner of Heatherton Road and Cleeland Street, Dandenong

Phone: 9767 3100

Ansie Uys - Centre Manager

Noble Park Aquatic Centre:

9 Memorial Drive, Noble Park

Phone: 9546 7955

Michael Zeman - Centre Manager

Springers Leisure Centre:

400 Cheltenham Road, Keysborough

Phone: 9701 5900

Michael Zeman - Centre Manager

Dandenong Stadium:

270 Stud Road, Dandenong North

Phone: 9794 7192

Trevor Barker – Operations Manager

Gloria Pyke Sporting Complex:

Greaves Reserve, Dandenong

Phone: 9794 6168

Christine Ware - Manager

- **Building Maintenance Issues:**

Structural or external to building only - 8571 1000

- **Contract Superintendent to be notified immediately of an incident:**

Nicole Labruna - 0403 072 292

Incident Procedures

Incident Classification

		Report to
<p>LEVEL 1 Negligible Incident</p>	<ul style="list-style-type: none"> • Minor First Aid • Minor incident involving damage to building 	Coordinator
<p>LEVEL 2 Minor Incident</p>	<ul style="list-style-type: none"> • Escalation of incident involving medical or safety issue • Minor injuries involving Emergency medical services 	Coordinator
<p>LEVEL 3 Moderate Incident</p>	<ul style="list-style-type: none"> • Fire or damage to complex resulting in disruption to normal services • Serious injury to staff member or public 	Coordinator
<p>LEVEL 4 Critical Incident / Major Impact</p>	<ul style="list-style-type: none"> • Death or serious injury to member of public or staff members • Major impact and interruption to Council services 	Coordinator Manager Director
<p>LEVEL 5 Catastrophic Incident</p>	<ul style="list-style-type: none"> • Multiple fatalities to staff or member public • Major impact and interruption to Council services 	Coordinator Manager Director

Immediate Response to an Incident Notification

When notification of an incident involving a Council operated service or infrastructure occurs, the staff member or volunteer involved is to obtain as much information of the incident as possible including:

- Nature of the incident
- Exact location
- Presentation situation and ongoing danger
- Time of incident
- Callers details

The initial contact checklist (Attachment 2) should provide guidance to ensure all information is recorded.


Out of Hours Incidents

Level 3, 4 and 5 incidents that occur out of hours should be notified via the Out of Hours contact number and to the appropriate officer.

All (Level 1 & 2) incidents must be reported to the Team Leader and Coordinator as soon as practicable.

Incident Response

Level 1-2 Low Impact Minor or Negligible Incident

Staff Members	Responsibilities	Reporting/Communications
Staff Member	<ul style="list-style-type: none"> • Report incident within 24 hours • Make site safe • Contact emergency services 	If person injured, report incident to Team Leader / Coordinator  Reporting to the Health and Safety Unit is required within 24 hours of the incident occurring (including all near misses)
Team Leader and / or Coordinator	<ul style="list-style-type: none"> • Contact Health and Safety team to initiate contact with WorkSafe • If after hours, ensure Duty Officer contacts WorkSafe 	Report incident to Risk Management team within 48 hours
Manager	<ul style="list-style-type: none"> • Sign off on incident report and agreed corrective actions 	Review risk control procedures

Level 3 Moderate Impact /Significant Event

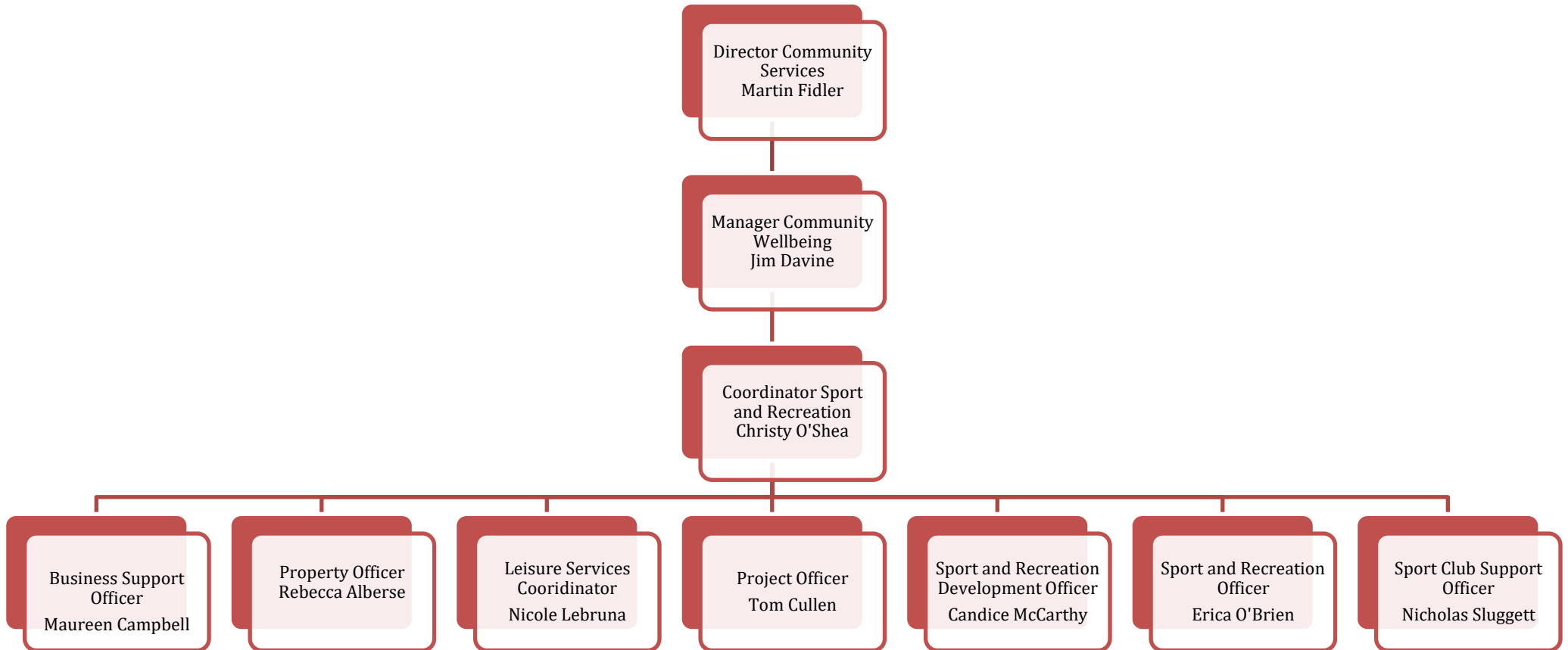
Staff Members	Responsibilities	Reporting/Communications
Staff Member	<ul style="list-style-type: none"> Report incident within 24 hours Make site safe by contacting Duty Officer 	<p>If person injured, report incident to Team Leader / Coordinator</p> <p>▼</p> <p>Reporting to the Health and Safety Unit is required within 24 hours of the incident occurring (including all near misses)</p>
Team Leader and / or Coordinator	<ul style="list-style-type: none"> Contact Health and Safety team to initiate contact with WorkSafe If after hours, ensure Duty Officer contacts WorkSafe 	Inform Media and report to Director the circumstances of the incident
Risk Management Team	<ul style="list-style-type: none"> Review risk control procedures Liaise with WorkSafe and other agencies 	
Manager	<ul style="list-style-type: none"> Determine level of incident based on consequence matrix Contact next of kin Ensure support systems such as EAP are made available Liaise with external stakeholders 	Inform Director
Director	<ul style="list-style-type: none"> Ensure Crisis Response Team (CRT) is established and Chairperson of CRT is contacted 	Inform CEO
CEO	<ul style="list-style-type: none"> Overview of process 	

Level 4-5 Catastrophic/Major Incident

Staff Members	Responsibilities	Reporting/Communications
Staff Member	<ul style="list-style-type: none"> Report incident immediately If after hours, contact Duty Officer to make site safe Contact emergency services Ensure support systems are established on the ground 	<p>If person injured, report incident to Team Leader / Coordinator</p> <p>▼</p> <p>Report to Team Leader / Coordinator</p>
Team Leader and / or Coordinator	<ul style="list-style-type: none"> Contact Health and Safety team to initiate contact with WorkSafe If after hours, ensure Duty Officer contacts WorkSafe Determine level of incident based on consequence matrix 	<p>Report incident to WorkSafe</p> <p>▼</p> <p>Manager sign-off</p> <p>Reporting to the Health and Safety Unit is required within 24 hours of the incident occurring (including all near misses)</p>
Risk Management Team	<ul style="list-style-type: none"> Contact EAP Liaise with WorkSafe and other agencies Establish support systems Contact insurer Provide specialist advice 	
Manager	<ul style="list-style-type: none"> Contact next of kin Ensure support systems such as EAP are made available Liaise with external stakeholders Review risk control procedures 	<p>Inform Media and report to the Director the circumstance of the incident</p> <p>▼</p>
Director	<ul style="list-style-type: none"> Ensure Crisis Response Team (CRT) is established and Chairperson of CRT is contacted 	Inform CEO

Attachment 1

Staff Structure and Contact Information



Attachment 2

Incident Checklist

1. Details

Name _____

Position _____

Phone number _____

2. Exact Location

Indicate the nearest reference points surrounding the place of the incident
(buildings, roads, natural sights)

3. Nature of the incident / Type of danger (tick ✓)

- People (Injuries)
- Assets or Infrastructure
- Environment
- Reputation
- Business Continuity
- Financial
- Public Safety

4. Emergency Services required? (tick ✓)? Yes No

Police Time _____

Ambulance Time _____

Fire Time _____



5. Time of incident (tick ✓) _____ AM PM

6. Has Incident Form been completed / received? (tick ✓) Yes No

7. Reporting Procedure – Who was notified (tick ✓)

- Coordinator
- Manager
- Director
- Media – note who as reference later

8. Initial Tasks

- 1) Create a clear understanding of the known facts
- 2) Plan an immediate response
- 3) Plan ongoing strategies



Incident Report

- PUBLIC LIABILITY
- FIRE
- THEFT
- COUNCIL PROPERTY DAMAGE (tick ✓)

REPORT FORM FOR ALL INCIDENTS WHICH MAY NOT BE COVERED BY INSURANCE. PLEASE NOTE THAT THIS REPORT MUST BE DIRECTED THROUGH YOUR DEPARTMENT MANAGER TO THE RISK MANAGEMENT UNIT IMMEDIATELY FOLLOWING RECEIPT OF INFORMATION REGARDING THE INCIDENT. COMPLETE AREAS APPLICABLE AND COMPLETE INVESTIGATION AND FOLLOW-UP ACTION.

GENERAL DETAILS

DATE: _____ DAY OF WEEK: _____ TIME: _____
AM/PM

LOCATION OF INCIDENT:

STATEMENT BY PERSON REPORTING EXACTLY HOW INCIDENT OCCURRED

(Give as much detail as possible to explain the cases and help to determine Council's Liability)

PERSON REPORTING INCIDENT:

DEPARTMENT: _____ PHONE: _____



DESCRIPTION OF PROPERTY LOSS OR DAMAGE

<u>Distribution</u>	<u>Initial</u>	<u>Date</u>
Manager	_____	__/__/__
R.M.U. (Risk Management Unit)	_____	__/__/__

SKETCH OF INCIDENT / AREA

**INVESTIGATION OR REPORT BY SUPERVISOR / DEPARTMENT MANAGEMENT
CONTRIBUTING FACTORS SURROUNDING THE INCIDENT**

LIST ALL CAUSES OF INCIDENT	CORRECTIVE ACTION TAKEN ON CAUSES	FUTURE ACTION TO BE TAKEN ON CAUSES	ACTION TAKEN BY WHO	DATE

COMMENTS:

SIGNED: _____ SIGNED: _____ SUPERVISOR DEPARTMENT MANAGER

Risk Management Unit REPORT:

REPAIRER: _____ ORDER NO.: _____ DATE: ___/___/___

ACCT NO.: _____ COST: \$ _____ COMMENT: _____ SIGNED: _____

REF TO INSURANCE CO.: _____ DATE: ___/___/___ FILE NO.: _____