

CSA MISSION SAFETY GUIDELINE

Applicable to all elements of a Hub Style mission

Definitions:

Hub - Connection point for surf missionaries in that area, made up of Hub coordinator, CS leaders and CS member helpers who outreach into different areas of the surf community

Hub Coordinator – Key leader for that area, person who connects, encourages and supports CS Leaders and member helpers

Activity Coordinator - person responsible for and over see's activity run by that Hub or a spoke of the hub.

Leader – a financial member of CSA who has fully completed the application process and has been approved by the RC. This is someone who shares the vision and mission of CSA agreeing to our statement of faith and values. This is a person who is responsible for running or leading a CSA activity or event. Only a leader can post on a CS social media page.

Member/Helper – Person who helps out at a CS event that has completed necessary requirements for child safety and mission safety that is not acting in a Leadership capacity. i.e. camp cook, driver,

Participant – any person who attends a CS event who is not a leader, or a member/helper is a participant

Minor – is any child under the age of 18 attending a CS event.

CS Activity - Any event that is promoted using CS communication channels and is run by CS Leaders.

Leadership

- Each local mission or hub must have a Hub or Mission Coordinator. This person has a grasp on the activities of CS locally and is responsible for making sure that leaders have filled in their yearly forms and are a financial member of CSA.
- All leaders involved in the activities of CSA must have completed their leadership form each year and paid their CSA membership fee. Leaders must have a valid WWC/Blue card and have a nominated accountability person.
- All leaders must do their child safety training (SP3) which needs to be updated every 24 months.
- Any helpers of a CSA activity must complete the Membership form and indicate that they are a helper. They must have a valid WWC/Blue card and have also done the child safety training (SP3)
- All coordinators of a CSA activity must complete a Risk Management Action Plan for the activity see Appendix 4
- All incidents must be reported by the activity Coordinator and copied and sent to the Hub Coordinator and the Regional Coordinator see Appendix 2 and 3 for Incident Report Form and Critical Incident Report Form
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Club night or bible study

- There should be at least one (preferably 2) leaders with Senior First Aid training in attendance.
- The ratio of leaders to participants must be 1:8 where the participants are under 18 years old.
- The Mission Coordinator may agree the ratio can be higher (for example 1:12) if the participants are over 18 year of age.
- The ratio may also be higher if there are helpers available.
- The ratio may, at the Mission Coordinators discretion, be lower (1:5) if there are special dangers or needs
- The ratio can include both male and female leaders, though there must be at least one Leader of the same gender as participants if any of the participants are under 18 years.
- The leader with the Senior First Aid qualification must have access to the missions first aid kit.
- The first aid kit needs to be industry standard "Workplace B First Aid Kit" or better (Ph Red Cross 1300 367 428)
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Surf Days

- For surf safety, please see the CSA Surf Safety Guideline 2018
- There should be at least one (preferably 2) leaders with Senior First Aid training in attendance
- There should be at least one (preferably 2) leaders with Surf Rescue certificates in attendance.
- The first aid kit needs to be easily assessable.

Camps

- There must be a Camp Coordinator, this person is responsible for overseeing the organising and safety of the camp.
- In all camps where minors are participating, the Camp Coordinator must communicate that the event is a drug and alcohol-free event and poor behaviour will be dealt with and possibly sent home.
- The Camp Coordinator must communicate to parents where the camp is and arrival and departure times and dates and contact details, so parent can contact the Coordinator
- The Camp Coordinator must liaise with the Camp Site manager as to possible hazards and safety issues.
- The Camp Coordinator must ensure the campsite remains clean and sanitary and is left in the same condition as it is found.
- The ratio of 1 leader to 8 participants who are minors remains.
- The camp must have signed parent/guardian release/indemnity forms which the camp coordinator will have available during the camp. Release forms must include emergency contact name and number, Medicare no, Private health, Medical conditions, allergies, medications taken, etc. See appendix 1 for sample Indemnity Form.

- The food handling and preparation guideline must be followed.
- There must not be male/female sleeping arrangements unless married, or siblings with parental consent.
- For surfing on a camp see the Surf Safety Guideline.
- Minors must not go anywhere without the express permission of a Leader.
- There must be a minimum of 4 people in a group together at the Camp Coordinators discretion if minors wish to explore. In case of injury, one can stay with the injured and two can get help.

Vehicles and Driving

- All drivers at CSA activities must have completed the Drivers Declaration.
- All vehicles used for CS activities must be roadworthy as to the standards of the state motoring laws, registered, licenced and insured.
- Driving should be within the speed limits and laws of the state in which the activity occurs.
- One person per seatbelt, with seatbelts worn at all times by every occupant.
- Drivers of participants who are minors must not be on their "P" plates unless they have written confirmation from the minor's parent/guardian stating that they are allowed to travel in the car of a P plate driver at a CS activity
- No riding in the back of Utes, vans or trailers.
- When driving long distances, make use of driver reviver stations, stopping every two hours to manage fatigue.
- Where possible have back-up drivers, namely leaders who don't take their car in case of driver fatigue or some other circumstance.
- If using a bus, have a back-up driver on board.
- Trailers must be roadworthy and licenced, all luggage to be secured well and drivers to be aware of dangers in towing.
- Leaders should ensure that all drivers have adequate fuel, water and maps available.
- Brief all drivers on where they are going, meeting points along the way and a 'plan B' if separated from the remainder of the group.
- Where possible maintain mobile phone contact (only passengers to have contact unless car has hands free accessibility).
- Only 4WD's may use a 4WD track.
- Drive safely exhibiting caution when driving on gravel or beach track not subject to speed limits.

Accident Procedures

- The first aid trained leader must be notified of all accidents or injuries at a CSA activity. They must assess the situation and administer treatment if needed.
- The first aid leader along with the activity coordinator will assess whether the person needs to be taken home. If the leader is unsure, they should contact the parent/guardian. Always err on the side of caution and ask person if they want to see doctor or go to hospital emergency.
- Camp Coordinator must inform parent/guardian of injury/accident at conclusion of activity and what first aid action was taken.

- First Aid leader along with the leader with the most information regarding the incident fill in the 'Incident Report Form'. See Appendix 2 for Incident Report Form

Critical Incidents

- A critical incident is injury or abuse that requires the immediate intervention of professionals.
- The first aid leader and activity coordinator must be notified immediately if someone suspects a critical incident has occurred. All other leaders must obey their instructions.
- The first aid leader and/or activity coordinator assess situation and call for emergency response if needed.
- First aid leader to apply first aid and comfort to injured person until ambulance arrives.
- Activity coordinator to have contact with person's parents whilst incident is being handled.
- Activity coordinator to contact Hub coordinator and Regional Coordinator to inform them of the incident.
- Other CSA leaders to care for rest of group, to make sure that everyone else participating in activity is safe and calm
- First aid leader to travel to hospital along with injured person and have contact with parent.
- Activity coordinator to fill in Critical Incident Form (see Appendix 3)
- Regional Coordinator to follow up with Activity coordinator to see if any further involvement is needed in way of counselling or debriefing.

Evacuation Procedure

- For all CSA activities a plan is needed if some falls sick, is injured, or if site becomes unsafe
- If in a remote location, activity coordinator to take note of where closest mobile reception is located.
- Know the location of the nearest emergency medical service and have their contact details available
- Make sure you have extra water and fuel, oil, spare fan belts and radiator hoses, if travelling to remote locations
- Drivers should return with the same passengers as they arrived with – unless changes have been cleared with the coordinator.
- The activity coordinator should double check that every person is evacuated and that no one is left behind.
- Leaders should not let children unattended but leave them in the care of another Leader or CSA helper.

Food preparation and storage

Hygiene

- For all who handle or serve food, a separate hand washing facility must be provided. A tub with soapy water and paper towel or hand sanitiser gel or wipes is a minimum.

- Hand washing must be done after toileting, coughing, sneezing or touching the face or hair.
- People with symptoms of food-borne or air-borne sicknesses (such as colds/flu or vomiting/diarrhoea) must stay away from all food preparations.
- Hands must be washed, or gloves changed after handling raw meat, drinks, cleaning equipment, rubbish and before serving food to others or continuing with food prep.
- Wash hands immediately after handling raw foods and before handling cooked or ready to eat foods.
- All cooking utensils, plates, cups, serving containers must be cleaned in hot soapy water.
- Regularly wash or replace dish cloths and tea towels.
- Don't use tea towels that have been used to wipe hands on bench tops or drying dishes. These should be washed and dried separately, or paper towel used.

Temperature Control

- Raw meat and other items needing refrigerating must be kept below 5 degrees either in a fridge or on ice in an esky.
- Raw meat must be completely sealed in a zip lock bag and plastic container.
- Hot foods must be reheated to 75 degrees and then kept at 60 degrees to remain hot.
- Frozen foods must be thawed in the refrigerator or microwave.
- Food needs to be cooked thoroughly to ensure it is safe to eat.

Storage

- Raw meat must be sealed and kept separately to fresh foods.
- All food unless already packaged must be covered or in a sealed container to prevent accidental contamination from other sources such as raw meat juice.
- Store food items carefully away from toxic chemicals, insect sprays and cleaning agents.
- Use different chopping board, utensils, and plates for raw food and ready to eat foods. If the same chopping board or knife needs to be reused ensure it is washed thoroughly in hot soapy water and dried before reuse.
- Thoroughly wash raw vegetables before preparation and eating

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APPENDIX 1

SAMPLE INDEMNITY FORM

Dear Parent/Guardian:

We are so stoked to have your child attend NewSwell 2018 in Torquay, Victoria. To make sure we take the best possible care of your child can you please give us a few extra details.

Childs Name: _____

Emergency Contact (name and phone): _____

Medicare number: _____

Health care provider: _____

Do you allow your child's photo to be used to promote CSA on media including FB and Instagram? Y. / . N

Does your child take any regular medication? _____

Any other health concerns we need to know about: _____

CHRISTIAN SURFERS AUSTRALIA

Whilst I realise all due care will be taken , I (insert parent/guardian name) _____ indemnify Christian Surfers Australia and its leaders against any claim made on behalf of the above camper arising out of any injury sustained during the surf camp. I accept that the camper participates in this surf camp at their own risk. I accept that Christian Surfers will assess conditions and will not force campers to surf in conditions they are not comfortable with. I also give Christian Surfers permission to seek any medical treatment for the above camper in the event of any injury if I cannot be contacted. I indemnify Christian Surfers Australia against any loss or damage of the camper's personal property during the camp.

Signed (parent/guardian): _____

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APPENDIX 2

INCIDENT REPORT FORM

CSA Hub : _____ Name of Activity: _____

Date of Incident: _____ Time of incident: _____

Location incident occurred: _____

People involved in the incident:

NAME	FULL ADDRESS	PHONE

- **Nature of Incident with a brief description (Circle):** Serious Leader Dispute, Person Injured, Illegal Act, Sexual Misconduct OTHER (May Attach report)

- **What warnings were there before the incident?**

Names of Witnesses:

NAME	ADDRESS	PHONE

- Have Christian Surfers Leaders spoken with any Parent? The Police (if needed)? Details and brief description:

- In your opinion, how did the CSA Leaders cope during and after the incident?

- If there was any, injury how was it treated and by whom?

- Was there an adequate first aid kit on site and a qualified first aid person?

SIGNED

Activity Coordinator: _____ Date: _____

Leader present at Incident: _____ Date: _____

Regional Coordinator: _____ Date: _____

[NOTE: RC to discuss with Leaders involved, analyse safety concerns for future reference & inform and send copy to CSA National office]

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APPENDIX 3

CRITICAL INCIDENT FORM

Critical Incidents can take a variety of form, some involving injury or abuse, while others are an emergency situation of a different type. Use the prompts and questions below to record information that applies to the current situation.

INITIATION OF THE EMERGENCY RESPONSE PROCESS

This form presumes that a call has been received asking for Emergency Responses Process activation, and that it has been decided to activate the process.

Call date and time:

Call made by:

Decision to activate the Emergency Response made by:

DETAILS OF CRITICAL INCIDENT

What has happened?

Where has it happened?

What time did it happen?

Who was involved?

Who else has been contacted other than the Regional Coordinator?

What is the current state of the situation? Is it stable? Is it safe?

TEAM LEADER AND CONTACT ADDRESS

What activity does this critical incident relate to?

Who is the Coordinator for this activity?

Activity location?

Location of critical incident?

Primary phone contact?

Other contact?

Second contact person

Number of participants?

Age range of participants?

Number of leaders?

NAMES OF INJURED OR DECEASED AND EMERGENCY CONTACT DETAILS FOR NEXT OF KIN

Complete as applicable

Name of Injured or deceased	Next of Kin	Contact details of next of kin (phone and address)	Details of injured or deceased conditions

Details of the location of the injured or deceased (hospital, police station etc include phone contact)

EMERGENCY SERVICES RESPONSE

Check with the Activity Leader that Emergency Services have already been called (this should occur prior to calling the Regional Coordinator)

Which emergency services were called and what response has occurred?

Ambulance ☐ Fire ☐ Police ☐ Other ☐

NEEDS ASSESSMENT

What's happening with the rest of the group (leaders and participants)? (Details of group evacuation if necessary):

How is the Activity Leader coping? (offer a supportive statement as appropriate)

How are the rest of the team handling the situation?

How are the participants coping with the situation?

Is this a situation where individual counselling is likely to be of assistance? Y/N
If yes, names of those who you think make need some immediate individual counselling

Do any of the participants need to be taken home? Y/N
If yes, name, address and phone (so counsellor and organisation representative can meet them and their caregiver)

MEDIA

What level of media activity is occurring?

Ask the Activity Leader if they can pass on the names and phone contacts of any media personnel at the location.

NEXT PHASE PLANNING FOR THE REGIONAL COORDINATOR

Is this a situation where sending the Regional Coordinator to the location would be useful and practical if not already there? Y/N
If yes, note what the RC needs in relation to food, accommodation clothing or anything else the RC needs to take to the site?

Should a counsellor or team of counsellors also travel to the site? Y/N
How will the RC take over responsibility for managing the critical incident and what should happen to assist the Activity Leader and the rest of the program?

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APPENDIX 4

RISK MANAGEMENT ACTION PLAN

Name of Activity: _____ Date: _____

Using **Risk Assessment Table** (see over) enter a value (1-3) according to level of risk.

1. High Risk
2. Medium Risk
3. Low Risk

NOTE: "New Risk Ranking is the ranking after control measures have been taken.

Hazard Identified	Risk Ranking	Control Measures	Person Responsible	NEW Risk Ranking
Describe each hazard here – EG sunburn, drowning	Rate Risk 1-3			

Safety Procedures in Event of a Safety Incident: (outline steps taken if safety incident occurs)

- 1 _____
- 2 _____
- 3 _____

Risk Assessment Produced by: _____ Date: _____
(Name and Sign)

RISK ASSESSMENT TABLE

CONSEQUENCES	LIKELIHOOD				
	VERY LIKELY	LIKELY	UNLIKELY	HIGHLY UNLIKELY	
	FATALITY	High Risk	High Risk	High Risk	Medium Risk
	MAJOR INJURIES	High Risk	High Risk	Medium Risk	Medium Risk
	MINOR INJURIES	High Risk	Medium Risk	Medium Risk	Low Risk
	NELIGIBLE INJURIES	Medium Risk	Medium Risk	Low Risk	Low Risk

Using this table enable assessment of likelihood and consequence, which can then be translated into levels of risk. Areas of high risk should be given first priority for elimination or control in the workplace.

CONSEQUENCE (extent of injury or ill health):

- **Fatality**
- **Major or Serious injury** – serious damage to health which may be irreversible, requiring medical attention and ongoing treatment.
- **Minor Injury** – reversible health damage that may require medical attention but limited ongoing treatment. This is less likely to involve significant time off work.
- **Negligible injuries** – first aid only with little or no lost time.

LIKELIHOOD (chance of each situation or events occurring):

- **Very likely** – exposed to hazard continuously.
- **Likely** – exposed to hazard occasionally.
- **Unlikely** – Could happen but only rarely.
- **Highly Unlikely** – Could happen but probably never will.