# CRITICAL TASKS: 2.0 – 2.4

Due: 12 February 2021

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| TASK 2.0 - PROVIDE ANTICIPATED MEDICAL COVERAGE REQUIREMENTS | | | | |
| Why do we need this information? | To design a plan which provides adequate first aid and sports medical coverage for all participants. | | | |
| Have you considered: | **The adequacy of medical support given:**   * Estimated total number of participants * Risk of injury involved in your sport * Competition conditions such as likely weather conditions or distance over which the event(s) will be conducted * Location of Event - number of venues used at any one-time, foreseeable dangers * Past experience of competitors * Any event which requires additional considerations   **The nature of first aid required:**   * Sports Trainer / Sports First Aid * Doctor * Physiotherapist * Any special requirements e.g. water rescue, lifeguards | | | |
| Medical Coverage Requirements - (as required to conduct a national standard competition) | | | | |
| Event / Activity | Dates Required | Time Required each day | Type of Medical support | Minimum Number Required |
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| **Does your sport have preferred personnel/suppliers?** | |  | | |
| **Is there any additional medical equipment required for your sport?** | |  | | |

Name of Sport: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**FINAL SUBMISSION DATE: TO BE SUBMITTED 12th FEBRUARY 2021**

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| TASK 2.1 – FINAL CONFIRMATION OF VENUE BOOKING | |
| Why do we need this information? | 1. Guarantees venue availability for the Australian Masters Games 2. To provide confirmation of the venue being used for the Australian Masters Games for participant registration purposes. |
| Have you considered: | * Your sport’s full program of events in booking this facility * Other sports who may be using the same facility * Provision of optional usage time if participant numbers are outside estimates e.g. More participants may necessitate greater hiring time * Adequate access to the venue has been negotiated for pre- and post-competition set up and dismantle * Additional spaces (i.e. not only field of play) such as First aid area, signage, change rooms, officials, parking, catering, seating requirements, bad weather arrangements, lost property area, PA system, VIP and volunteer area have all been satisfied |
| **Please provide any additional comments that may be of use to AMG Management in regard to your venue booking.** |  |
| ACTION | Please attach a copy of your written booking confirmation from the facility/venue provider.  Electronic submission is encouraged. |
| **\*Please note:** If your sport requires any road closures for your event please provide documentation to the Project Management Team as soon as this becomes available to you. | |

Name of Sport: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**FINAL SUBMISSION DATE: 12 FEBRUARY 2021**

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| TASK 2.2 - ADVISE GENERAL AND VENUE SPONSORSHIP ISSUES, INCLUDING EXISTING SIGNAGE AND ARRANGEMENTS | | | | |
| Why do we need this information? | | 1. AMG Project Management Team is presently seeking sponsors (both product and service providers). We would like to know where possible conflicting Games sponsorship exists. 2. Conflicting signage to Games sponsors or suppliers reduces sponsor value. | | |
| Have you considered | | * Duration and conditions of sponsor or supplier arrangements on site e.g. Is the arrangement an exclusive arrangement? * Map of the venue showing existing signage * Number and size of existing sponsor/advertising signage * Are the signs fixed or portable? * Can conflicting venue sponsor signage be covered or removed for the duration of the Australian Masters Games? | | |
| **Please list any Sponsors the venue or your sport may have** | | | | |
| **Sponsor Name** | **Type and description of Sponsorship e.g. Naming rights** | | **Duration of Arrangement** | **Venue Signage Details (number, size, fixed/portable etc.)** |
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Name of Sport: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**FINAL SUBMISSION DATE: 12 FEBRUARY 2021**

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| TASK 2.3 – SUBMIT VENUE AUDIT & VENUE SITE PLAN | |
| Why do we need this information?  Venue Site Plan | 1. To confirm the placement of Australian Masters Games Logos and sponsorship signage for Australian Masters Games competitions 2. To check adequate provisions have been made for facilities needed in the running of a national standard sporting event 3. For supply to the Operations department for risk management and safety purposes e.g. ambulance access, road closures etc. |
| Why do we need this information?  Venue Audit | 1. Ensures that each venue is suited to the sport and participants attending. 2. Advises the sports and AMG staff of any issues with the venue that can be rectified prior to 2021AMG. 3. Ensures the sports medicine provider has adequate space/shelter for Games time. 4. Allows AMG staff to communicate the key features of each venue to participants via the website |
| Have you considered: | * Obtaining a current map from the venue that will be used in the Australian Masters Games * Making brief drawings of the placement of additional facilities and locations of alternative sports at the same venue * Reviewing the venue site plans from previous events * Detailing street names on the venue site plan * Confirming a site manager from your sports committee, with the principal responsibility of overseeing the management of the sporting site |
| ACTION  Site Plan | Please attach and email an electronic site plan for all of your sports venues with the relevant information below detailed on this plan.  2021 AMG Project Management Team can assist where required. |
| ACTION  Venue Audit | Assist your Sport Coordinator in completing a site inspection and venue audit. |

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| HAVE YOU INCLUDED ON YOUR VENUE PLAN: | |
| **Area** | **Included Yes / No** |
| Medical / emergency access points |  |
| First Aid area |  |
| Emergency meeting point |  |
| Canteen / catering facilities |  |
| Competition area /field or court numbers |  |
| Toilets |  |
| VIP area |  |
| Change rooms |  |
| Officials area |  |
| Disabled access |  |
| Alternative bad weather area |  |
| Merchandise area |  |
| Signage locations |  |
| Warm/up areas |  |
| Parking |  |
| PA system |  |

Name of Sport: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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| TASK 2.4 - SUBMIT SPORT PROGRESS REPORT 1 | | |
| Why do we need this information? | 1. To provide documentation of the progress each sport is making 2. Allow all sport committee members to review progress of other committee members | |
| Have you: | Completed all required critical tasks? |  |
| Got any additional updates to add to previous submitted tasks? |  |
| Undertaken all listed promotional tasks to date detailed in your sport specific marketing plan |  |
| **Please provide any general comments or note any areas of concern:** | | |

Name of Sport: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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