EVENT REPORT – President of the Commissaires Panel (PCP)

Please note a copy of this report will be sent to the Technical Panel and to the Event Organiser

Name of the Event:

Certification Level:

Code:

Date of Event:

Location of Event:

Number of Riders:

Name:

Contact Details Phone

Email:

Technical Delegate (if applicable):

Assistant PCP (If applicable):

Assistant Commissaires:

Event Organiser:

Main Contact:

Email:

Event Summary: [Provide an overall event summary]

Event Rating: [rate the event from 1 – 5 overall (5 being the highest)]

Evaluation of the collaboration and relationship with the Event Organiser: Excellent Good Fair Poor

Health and Safety:

1. Were you provided with a copy of the event’s Safety Management Plan prior to the event? Yes  No
2. Were you given an opportunity to provide feedback to the plan?

Yes  No

1. Were you aware of the incident management and control procedure of the event? Yes  No
2. Were the conditions of Event Certification meet? Yes  No
3. Were you including in pre and post event meetings and debriefs?

Yes  No

1. Were there any extra risks that should be mitigated? Yes  No
2. Did the event provide a safe environment for you to undertake your duties?

Yes  No

1. Did the event provide for safety of others in their delivery of the event?

Yes  No

1. Did any risk mitigation increase risk for riders? Yes  No

(e.g. cones, barriers)

1. Did the event have sufficient medical support? Yes  No
2. Was an Approved Traffic Management Plan in place? Yes  No  N/A
3. Were there any issues with the Traffic Management? Yes  No  N/A
4. Was there a clear emergency procedure in place? Yes  No
5. Was the first aid adequate? Yes  No
6. Did you have any serious concerns in regards to H&S that need to be raised with the event organsiers? (if yes, please list below) Yes  No

List any general comments or recommendations for next year:

Summary of Incidents:

1 Were they any serious incidents/injuries? Yes  No

2 Were there any [notifiable](https://worksafe.govt.nz/notifications/notifiable-event/what-is-a-notifiable-event/) incidents/injuries? Yes  No

3 Were there any minor incidents/injuries? Yes  No

4 Were there any near miss incidents? Yes  No

5 Were there any issues getting timely treatment Yes  No

6 Did any riders involved require off site treatment Yes  No

List any incidents/injuries (or include organizers incident report) and near misses:

Programme:

1 Was the event programme run to schedule? Yes  No

2 Are additional race categories required? Yes  No

3 Are changes required to event distances? Yes  No

4 Were Start lists available for riders and officials? Yes  No

List any general comments or recommendations for next year:

Venue Summary:

1. Was the venue suitable for the event? Yes  No
2. Are there any improvements recommended? Yes  No
3. Was adequate parking provided? Yes  No

4 Were toilet facilities adequate? Yes  No

5 Were adequate refreshment options available? Yes  No

6 Was the Public Address system adequate? Yes  No

7 Was the Rider Registration area adequate? Yes  No

8 Was there adequate work area/shelter for officials? Yes  No

9 Was there adequate area for technical checks? Yes  No

List any general comments or recommendations for next year:

Commissaires:

1 Were there sufficient commissaires? Yes  No

2 Are there additional Commissaire roles required? Yes  No

3 Were adequate resources provided at the event? Yes  No

List any general comments and attached the duty sheet:

Disciplinary/Rules:

1 Were any sanctions issued? Yes  No

2 Are there any outstanding fines that need to be collected by Cycling New Zealand? (please detail below) Yes  No

3 Was the Panel convened to deal with any matters? (please detail below)

Yes  No

4 Are there any recommendations for rule changes? Yes  No

List any general comments and details (note: any collected fines should be sent to Cycling New Zealand):

Communication:

1. Did you receive enough information from Event Organisers prior to the event? Yes  No

2 Did you have an appropriate level of communication and consultation at the event? Yes  No

3 Did the Event Organiser provide adequate co-operation with all your requests? Yes  No

4 Were there any requests from the Event Organiser that you could not meet? Yes  No

List any general comments any addition communication you would like:

Managers Meeting / Rider Briefings

1. Were adequate facilities provided for meetings? Yes  No
2. Were all required personnel in attendance? Yes  No
3. Was the meeting run in accordance with Regulations?

Yes  No

1. Did you review meeting and briefing notes with the Event Organiser?

Yes  No

1. Were the Rider briefings delivered in accordance with the Safety Management Plan? Yes  No

List any general comments:

Course/s

1. Was the course suitable for level of competition? Yes  No

2 Were there any significant hazards for riders? Yes  No

3 Were there any hazards for public / supporters? Yes  No

4 Was there an area off road to corral riders before start?

Yes  No

5 Were there course sufficient marked? Yes  No

6 Were there course maps available online/at event? Yes  No

7 Was there suitable parking for official vehicles? Yes  No  N/A

8 Were the vehicles provided suitable? Yes  No  N/A

9 Were vehicles fitted with appropriate safety equipment?

Yes  No  N/A

10 Were drivers adequately skilled for bike racing? Yes  No  N/A

11 Did you brief the drivers? Yes  No  N/A

12 Did drivers adhere to regulations and drive safely? Yes  No  N/A

List any general comments or recommendations for next year:

Anti Doping

1 Was Drug Free Sport NZ testing conducted? Yes  No

2 Was the room/facilities satisfactory? Yes  No

3 Did the Event Organisers provide all necessary assistance to DFSNZ ?

Yes  No

4 Were you notified by DFSNZ of their presence? Yes  No

List any general comments:

General:

1 Were results produced in a timely manner? Yes  No

2 Were results accurate and in the specified format? Yes  No

3 Were there sufficient event staff/volunteers to deliver the event in accordance with the plan? Yes  No

4 Did all riders/officials hold a Cycling New Zealand Licence?

Yes  No

5 Were Presentations conducted promptly and in a professional manner?

Yes  No

6 Did you receive agreed and appropriate expenses? Yes  No

List any general comments or recommendations for next year:

Key Learnings and Recommendations for Commisssaires:

Key Learnings and Recommendations for Event Organisers:

Commissaires Feedback: Please complete the following evaluation form to assist with the development of commissaires that attended the event.

Any Further Comment:

**Name**  **Date**

**Signature**

Completed form to be returned within **14 days** to Cycling New Zealand through [commmissaires@cyclingnewzealand.nz](mailto:commmissaires@cyclingnewzealand.nz)