Field Trip Risk Assessment



*Click to add image*

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| --- | --- |
| **Risk Assessment No** | Click or tap here to enter text. |
| **Document References** | Click or tap here to enter text. |

Before commencing, please see the reference page (page 3) for a description of the risk assessment process and the risk assessment matrix.

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Area** | Click or tap here to enter text. | | | **Location (room #)** | Click or tap here to enter text. | | |
| **Title / Description** | Click or tap here to enter text. | | | | | | |
| **Assessed by Name(s)** | Click or tap here to enter text. | **Assessed by Position(s)** | Click or tap here to enter text. | **Assessment Date** | Click or tap to enter a date. | **Review Date (5 years or earlier if circumstances / information change)** | Click or tap to enter a date. |

# ADDITIONAL INFORMATION:

1. ***Does this project require any of the following documentation?*** If STATUS is 'Yes' please provide approval/permit reference details/number and date for each document.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  |  | **STATUS** | **Approval/permit reference details/number** | **Date** |
|  | National Parks / Council approval / permit | Choose an item. | Click or tap here to enter text. | Click or tap to enter a date. |
|  | DENR / ARD approval / permit | Choose an item. | Click or tap here to enter text. | Click or tap to enter a date. |
|  | IBC/OGTR approval | Choose an item. | Click or tap here to enter text. | Click or tap to enter a date. |
|  | Human / Animal ethics approval | Choose an item. | Click or tap here to enter text. | Click or tap to enter a date. |
|  | Material Transfer Agreement (MTA) | Choose an item. | Click or tap here to enter text. | Click or tap to enter a date. |
|  | Other permits/certifications/licences | Details: Click or tap here to enter text. | | |
|  | Other mandatory documentation | Details: Click or tap here to enter text. | | |

1. ***Have Safe Work Procedures been developed for this field trip/work?*** Yes  No  If YES, please enter of the **document references** at the top of the page.

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# Review the risk measured, and the controls, then please select one of the following:

1. The assessment reveals that the potential risk to health and safety from the use of the plant/equipment/procedure is not currently significant.
2. The assessment reveals that the potential risk to health and safety from the use of the plant/equipment/procedure is significant. However controls are in place that reduce risk as low as is reasonably practicable.

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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Identified Hazards** | | | | **Risk Assessment** | | **Risk Rating**  **(see matrix)** | **Required Controls (consider control hierarchy)** | **Residual risk** | | | **Implementation** |
| **No.** | **Hazard Type** | **Hazard Description prompts** | **Comment/Specific Details** | **Consequence** | **Likelihood** |  |  | **Consequence** | **Likelihood** | **Risk Measure (see matrix)** | **Date Controls Implemented** |
| **1** | Choose an item. | Click or tap here to enter text. | Click or tap here to enter text. |  |  |  | Click or tap here to enter text. |  |  |  | Click or tap to enter a date. |
| **2** | Choose an item. | Click or tap here to enter text. | Click or tap here to enter text. |  |  |  | Click or tap here to enter text. |  |  |  | Click or tap to enter a date. |
| **3** | Choose an item. | Click or tap here to enter text. | Click or tap here to enter text. |  |  |  | Click or tap here to enter text. |  |  |  | Click or tap to enter a date. |
| **4** | Choose an item. | Click or tap here to enter text. | Click or tap here to enter text. |  |  |  | Click or tap here to enter text. |  |  |  | Click or tap to enter a date. |
| **5** | Choose an item. | Click or tap here to enter text. | Click or tap here to enter text. |  |  |  | Click or tap here to enter text. |  |  |  | Click or tap to enter a date. |
| **6** | Choose an item. | Click or tap here to enter text. | Click or tap here to enter text. |  |  |  | Click or tap here to enter text. |  |  |  | Click or tap to enter a date. |
| **7** | Choose an item. | Click or tap here to enter text. | Click or tap here to enter text. |  |  |  | Click or tap here to enter text. |  |  |  | Click or tap to enter a date. |
| **8** | Choose an item. | Click or tap here to enter text. | Click or tap here to enter text. |  |  |  | Click or tap here to enter text. |  |  |  | Click or tap to enter a date. |
| **9** | Choose an item. | Click or tap here to enter text. | Click or tap here to enter text. |  |  |  | Click or tap here to enter text. |  |  |  | Click or tap to enter a date. |

***Copy and paste subsequent rows as required to keep the lists and date fields.***

**To be completed by Supervisor**

# Review of control measures

I am satisfied that appropriate controls are in place and the risk level is as low as reasonably practicable – Yes  \*No  (\*if no, you must do another Risk Assessment.)

Supervisor signature: Click or tap here to enter text. Date: Click or tap to enter a date.

**Purpose of this Risk Assessment:**

to bring together the assessment of all risks associated with the conduct of a protocol or process that uses plant, &/or hazardous chemicals &/or requires ethics, OGTR approval or other permits, and to identify the controls required to minimise those risks:

* Consider the use of any **hazardous chemicals** and **plant/equipment** in the procedures and the **environment** and **manner** in which it is conducted.
* Cross reference all relevant Hazardous Chemicals or Plant Risk Assessments, and include approval/permit references where applicable.

**HOW TO ASSESS THE RISK**

**Step C – Calculate the Risk Level**

1. Take the Step A rating and select the correct line in the matrix below.
2. Take the Step B rating and select the correct column in the matrix below.
3. Circle the risk level where the two ratings cross in the matrix below.

Risk level = Click or tap here to enter text.

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| --- | --- | --- | --- |
| **Step A - Consider the consequences** | | **Step B - Consider the likelihood** | |
| For each hazard, consider the consequences if something happens. Consider what could reasonably have happened, as well as what actually happened (if there was an accident/ incident). Look at the descriptions below and choose the most suitable consequence below. | | How likely is it that something will happen as a  result of the hazard?  Choose the most suitable Likelihood below. | |
| **Consequence** | **Description** | **Likelihood** | **Description** |
| Catastrophic | May cause death or  permanent disability, and/or permanent ill health | Very likely | Expected to occur in most  circumstances |
| Major | Severe injury or illness | Likely | Will probably occur in most  circumstances |
| Minor | Minor (usually reversible) injury  or illness resulting in days off work | Possible | Might occur occasionally |
| First Aid | First aid level medical  treatment | Unlikely | Could happen at some time |
| Negligible | No treatment required | Highly  unlikely | May happen only in exceptional  circumstances |

**Risk Matrix**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Consequence** | **Likelihood** | | | | |
| **Very likely** | **Likely** | **Possible** | **Unlikely** | **Highly**  **unlikely** |
| **Catastrophic** | Extreme | High | High | High | Medium |
| **Major injury** | High | High | High | Medium | Medium |
| **Minor injury** | High | Medium | Medium | Medium | Medium |
| **First aid** | Medium | Medium | Medium | Low | Low |
| **Negligible** | Medium | Medium | Low | Low | Low |

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| --- | --- | --- | --- | --- | --- | --- |
| **Prioritising Hazards** | | |  | **Control Hierarchy** | |  |
| **Risk Level** | **Priority** | **Action** |
| **Extreme** | 1 | * Cease task/activity immediately; * Implement short term safety controls to make the situation safe; * Notify supervisor/manager and assess activity; and * Do not proceed with task/activity until corrective action has been implemented, and reviewed and approved by the relevant Vice-President and Executive Dean of College or Portfolio Head. | Elimination | *Remove hazard* |
| Substitution | *Use a less hazardous alternative* |
| Isolation | *Eg Restrict access, use in a closed container, fume cabinet* |
| **High** | 2 | * Implement short term safety controls to make the situation safe; * Notify supervisor/manager and assess activity; and * Do not proceed with task/activity until corrective action has been implemented, and reviewed and approved by the relevant Vice-President and Executive Dean of College or Portfolio Head. |
| Engineering | *Eg Trolleys to move loads, guards on machinery, fume cupboard* |
| Administration | *Eg Training, Safe Work Procedure, signage* |
| **Medium** | 3 | * Implement short term safety controls. * Notify supervisor/manager and assess activity. * Implement control measures. |
| PPE - Personal Protective Equipment | *Eg Gloves, respirator, safety glasses* |
| **Low** | 4 | * Notify supervisor/manager and assess activity. * Implement control measures. | See WHS Risk Management Procedure for further details | | | |