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| C:\Users\susanb\AppData\Local\Microsoft\Windows\Temporary Internet Files\Content.Word\PRIMARY_A_Vertical_Housed_RGB.PNG | Health & Safety field work risk assessment Form |

For use in conjunction with the and the.

The following forms and guidance materials are available for use: [Health & Safety: Field work plan](https://safety.unimelb.edu.au/__data/assets/word_doc/0009/4812957/field-work-plan.docx), [Health & Safety: Field work guidelines](https://safety.unimelb.edu.au/__data/assets/pdf_file/0004/4699093/field-work-guidelines.pdf), [Health & Safety: Risk management requirements](https://safety.unimelb.edu.au/__data/assets/pdf_file/0009/4708161/health-and-safety-risk-management-requirements.pdf), [Health & Safety: Off-campus requirements](https://safety.unimelb.edu.au/__data/assets/word_doc/0006/4591383/Health-and-Safety-Travel-and-off-campus-requirements.docx).

For further information, contact your [Health and Safety Business Partner](https://safety.unimelb.edu.au/health-and-safety-contacts).

| RA No./ERMS Ref.:       | Date:       | Version No.:       | Review Date:       | Authorised by:       |
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| STEP 1 – ENTER INFORMATION ABOUT THE ACTIVITY/TASK, ITS LOCATION AND THE PEOPLE COMPLETING THE RISK ASSESSMENT |
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| School/Faculty/Department:       | Date(s) of field work:       | Assessed by (Field Trip Leader/Field Work Supervisor):      | HSR/Employee representative:      |
| **Location of field work:**      | Are there any licensing/permit requirements?[ ]  Yes [ ]  No | If “yes” provide details:      |
| Description of the field work:       | Number of Participant(s):      |

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| List systems of work for the activity/task:● Training ● Inspections● SOPs ● Existing controls● Emergency situations |       |
| Is there past experience with the activity/task that may assist in the assessment?● Existing controls ● SOPs ● Standards● Industry standards ● Incidents & near-hits ● Legislation & Codes● Training ● Incident Investigation ● Guidance material |       |

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| Step 2: risk rating – risk martrix and defintions |

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| **Likelihood** | **Consequence** |
|  | **Insignificant** | **Minor** | **Moderate** | **Major** | **Severe** |
| **Almost certain** | Medium | High | High | Extreme | Extreme |
| **Likely** | Medium | Medium | High | Extreme | Extreme |
| **Possible** | Low | Medium | Medium | High | Extreme |
| **Unlikely** | Low | Low | Medium | High | High |
| **Rare** | Low | Low | Low | Medium | High |

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| **Likelihood** |  | **Consequence** |
| Almost certain – will occur in most circumstances when the activity is undertaken (greater than 90% chance of occurring) |  | Insignificant –First aid treatment, minor injury, no time off work |
| Likely - will probably occur in most circumstances when the activity is undertaken (51 to 90% chance of occurring) |  | Minor – Single occurrence of medical treatment, minor injury, no time off work |
| Possible – might occur when the activity is undertaken (21 to 50% chance of occurring) |  | Moderate – Multiple medical treatments, non-permanent injury, less than 10 days off work |
| Unlikely – could happen at some time when the activity is undertaken (1 to 20% chance of occurring) |  | Major – Extensive injuries requiring medical treatment (e.g. surgery), serious or permanent injury/illness, greater than 10 days off work |
| Rare – may happen only in exceptional circumstances when the activity is undertaken (less than 1% chance of occurring) |  | Severe – Severe injury/illness requiring life support, actual or potential fatality, greater than 250 days off work |

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| **Risk Rating Priority for Action** |
|  | **Risk acceptance guide** | **Action** | **Recommended action time frame** |
| **Extreme** | Not acceptable | Cease or isolate source of riskImplement further risk controlsMonitor, review and document controls | ImmediateUp to 1 monthOngoing |
| **High** | Generally (in most circumstances) not acceptable | Implement risk controls if reasonably practicableMonitor, review and document controls | 1 to 3 monthsOngoing |
| **Medium** | Generally (in most circumstances) acceptable | Implement risk controls if reasonably practicableMonitor, review and document controls | 3 to 6 monthsOngoing |
| **Low** | Acceptable | Monitor and review | Ongoing |

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| STEP 3 – Identify hazards and associated risk Scores and controls |
| For each of the following prompts:* **Review the prompts/examples** for each hazard that may potentially exist for the activity/task.
* Determine and record an **inherent risk score** using the risk matrix.
* In the **comments** box, describe when and where the hazard is present.
* Specify the risk **control type**, for each current or proposed risk control.
* Provide a **control description** for each current or proposed risk control.
* Where **proposed risk control(s)** have been identified complete a [Health & Safety: Action plan](https://safety.unimelb.edu.au/__data/assets/word_doc/0005/4698680/health-and-safety-action-plan.docx);
* Determine the **residual risk score** using the risk matrix

**Note:** Field work with a medium to extreme risk score requires a Field work plan. | Hierarchy of Control (Control Type)El – EliminationS – SubstitutionEn – Engineering Is – Isolation G – GuardingSh – ShieldingA – Administrative T – Training In – InspectionM – Monitoring H – Health MonitoringP – PPE |

| Category | InherentRisk score | Comments (when and where hazard is present) | Control type | Control description(Current And Proposed) | Residual Risk Score |
| --- | --- | --- | --- | --- | --- |
| Can anyone be adversely affected by the ENVIRONMENTAL conditions: |       |       |       |       |       |
| ● Extremes in temperature that could cause hyperthermia or hypothermia● Weather conditions such as strong winds, rain, or continuous sunshine (high UV)● The location is difficult to access ● The location is remote● The terrain is rocky, uneven, very step.● There are bodies of water such as dams, rivers, or the ocean● Working at heights (eg abseiling) ● Other |
| Can anyone be adversely effected by the FAUNA and FLORA: |       |       |       |       |       |
| ● Poisonous fauna such as snakes, scorpions, octopi ● Biting and stinging insects/arachnids● Known allergies to sensitivities to plants● Dense forest or undergrowth ● Burrowing animals● Other |
| Can anyone be injured from the PLANT and/or EQUIPMENT used during the field work: |       |       |       |       |       |
| ● Struck, crushed or entangled ● Cut or stabbed● Shearing or friction ● Slip, trip or fall● Manual handling/ergonomics ● Vibration● Other |
| Can anyone be injured or adversely effected by CHEMICALS |       |       |       |       |       |
| ● Storage ● Handling● Decanting/Mixing ● Applying/Using● Spill/Leak ● Disposal● Other |
| Can anyone be injured or adversely effected from the MANUAL HANDLING requirements of the activity: |       |       |       |       |       |
| ● Excessive effort ● Awkward postures● Repetitive body movement or posture● Lack of consideration for human behaviour causing mental or physical stress● Other |
| OTHER  |       |       |       |       |       |
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| STEP 4 – Identify the support SYSTEM requirements for field work |
| For each of the categories:* Identify the **requirements** for each of the support system categories that will be used during the field work.
* Describe the **possible hazards or adverse outcomes** that may be associated with the support system.
* Specific **controls** to mitigate or reduce the possible hazards or adverse outcomes.
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| **What Are the Requirements for the following SUPPORT SYSTEMS:** | **Possible Hazards or Adverse Outcomes** | **Control Description****(Current and Proposed0** |
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| TRANSPORT |       |       |
| ● Road vehicle/car ● Four wheel drive● Mini bus ● Bus● Boat ● Bicycle● Other |
| COMMUNICATION and NAVIGATION |       |       |
| ● Mobile phone ● Land line● Satellite radio ● Marine radio● Compass ● Maps● Satellite navigation ● Other – specify |
| FOOD and WATER |       |       |
| ● Take food: Number of days:       ● Take water : Number of litres:       ● Hygiene – water for washing● Toilet arrangements and requirements● Hygiene – litter ● Other factors |
| LEGAL COMPLIANCE |       |       |
| ● Boat licence ● Fishing licence● Firearms ● Moisture gauge use licence● Permits for National Parks entry/removal of specimens● Fires in the open ● Other |
| EMERGENCY PLAN |       |       |
| ● First aid arrangements● Medical conditions/fitness of participants● Communication arrangements● Closest help - remoteness● Transport arrangements ● Other |

| STEP 5 – ImpleMEntation and consultation process |
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| Determine the person responsible for reviewing and implementing the risk assessment including the identified controls. **For field work activities assessed as a medium to extreme risk, ensure that a field work plan has been completed, reviewed and signed off.**Obtain the authorisation of the management representative. This may be the Field Trip Leader/Field Trip Supervisor or other where more senior authorisation is required.Ensure the HSR (if applicable) has been consulted. Ensure the participant(s) undertaking the fieldwork have been consulted.**Record below the names of the persons consulted.** |
| Management representative |       | HSR/Employee representative |       |
| Employee(s)/Participant(s) |       | Employee(s)/Participant(s) |       |
| Employee(s)/Participant(s) |       | Person Responsible for implementation |       |
| Field work participantsMultiple participants/groups will be briefed on the risk assessment and field work plan prior to the activity. |      For large groups list on a separate form and attach |

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| Extra writing room - use this page to enter extended comments or descriptions |
|       |