



FIELD ACTIVITY RISK ASSESSMENT FORM

Field Activity Title: _____	
Subject Name (if applicable): _____	Subject No. _____
Date(s) of Activity: From: ____/____/____	To: ____/____/____
Supervisor/Leader: _____	
Location Assessed By: _____	
Date Assessed: ____/____/____	

Outline of Field Activity:

Step 1: IDENTIFY POTENTIAL AND EXISTING INDIVIDUAL HAZARDS (Using Table 1, assess each hazard as high, medium or low. Blank or no rating indicates the hazard is not applicable to this particular field activity)

Risk Rating	Risk Rating	Risk Rating	Risk Rating
Camp/Bush Fires	Cold Environment/Hypothermia/Frost Bite	Working in/near water (boats, swimming, diving)	
Noise	Hot Environment/Dehydration/UV	Contaminated Waters	
Concealed Holes	River, Stream or Lake Crossing	Fatigue (eg. driving long hours)	
Slippery Surfaces	Hail/Severe Storm/Lightening	Manual Handling/Lifting	
Rainfall/Flood	Moving/Falling objects	Use of Hazardous Chemicals	
Heavy Traffic Area	Falls from heights/Cliffs	Unstable/Uneven/Soft ground	
Violent Persons	Bites/Stings (wasps, jellyfish, leeches)	Hazardous Equipment (hammers, augers, drills)	
Harassment	Animal Attacks (snakes, dingos)	Fencing (wire, electric, high)	
Dry Environment	Strong currents/wave action/tides	Other(s) (please specify)	

TABLE 1

Step 1 – Consider the Consequences What are the consequences of this incident occurring? Consider what <u>could reasonably</u> have happened as well as what actually happened. Look at the descriptions and choose the most suitable Consequence.		Step 2 – Consider the Likelihood What is the likelihood of the consequence identified in step 1 happening? Consider this without new or interim controls in place. Look at the descriptions and choose the most suitable Likelihood.		Step 3 – Calculate the Risk 1. Take step 1 rating and select the correct column 2. Take Step 2 rating and select the correct line 3. Circle the risk score where the two ratings cross on the matrix below. E = Extreme, = High, M = Medium, L = Low N = Negligible Risk Score =					
CONSEQUENCES		LIKELIHOOD							
Consequence	Description	Likelihood	Description	CONSEQUENCES					
Major	Death and extensive injuries	A	The event is expected to occur in most circumstances	LIKELIHOOD					
Moderate	Medical treatment	B	The event could occur at some time		Maj	Mod	Min	Ins	
Minor	First aid treatment	C	The event could occur, but only rarely		A	E	E	H	M
Insignificant	No treatment	D	The event may occur, but probably never will.		B	E	H	M	M
					C	H	M	M	L
					D	M	M	L	N

Step 2: OVERALL RISK ASSESSMENT

(Taking into account the hazards identified in Step 1 and the likelihood and consequences of hazards occurring during the activity, assess the overall risk of the activity as a whole by circling the appropriate risk rating on Table 1, above)

ASSESSMENT SUMMARY (please tick)

- | | |
|---|---|
| <input type="checkbox"/> Low Risk (routine assessment) | - Make note of risks and file in relevant department. |
| <input type="checkbox"/> Medium Risk (readily controlled/minimised) | - Provide participants with a copy and file in department. |
| <input type="checkbox"/> High Risk (not readily controlled/minimised) | - Do not proceed with activity until risks have been adequately controlled and appropriate insurance arrangements confirmed. Once risks are controlled, provide participants with a copy and file in relevant department. |

Step 3: RISK CONTROL AND ACTIONS (please tick)

Please note: First Aid Kit and appropriate clothing, footwear and hat are always required, regardless of real or perceived risks.

Priority	Control	Example	✓
1.	Eliminate	Removing the hazard.	
2.	Substitute	Replacing a hazardous process with a less hazardous one.	
3.	Isolation	Isolating the hazard from the person at risk, eg using a guard or barrier.	
4.	Engineering	Redesign a process or piece of equipment to make it less hazardous.	
5.	Administrative	Adopting safe work practices or providing appropriate training, instruction or information. eg. Following the Field Activity Guidelines.	

Example

Hazard	Problem	Remediation
Working in/near water in a peat swamp	Pools of water, drowning	Wear PPE, work in pairs, report back to Supervisor/Leader when task is completed.

Actions taken:

Completed By: _____	
Signed: _____	Date: ____/____/____
Signed (Supervisor): _____	Date: ____/____/____
Signed (H.O.D): _____	Date: ____/____/____