

FIELDWORK RISK ASSESSMENT FORM

You should read 'Guidance on Safety in Fieldwork' before completing this form.

The purpose of this risk assessment is to identify possible causes of harm and measures needed to avoid these - before an accident occurs.

A **hazard** is anything with the potential to cause harm. The **risk** is the likelihood that someone will be harmed by the hazard and the severity of the harm caused. A high risk is one which is very likely to occur and/or may cause death or serious injury/illness. A low risk is extremely unlikely and/or would result in trivial or no injury/illness. A medium risk is in between these two.

By carrying out a risk assessment, you can direct attention and resources where they are most needed to prevent injuries or ill-health.

The five steps to carry out a risk assessment are :

1. **Identify the hazards** - find out about the site, the work, where you will be staying, how you will be travelling etc.
2. **Identify who might be harmed and how** - think about risks to yourself and others in your team. People with health problems, disabilities or lacking experience in fieldwork may be at greater risk and need extra protection.
Think about harmful effects of your work on the environment and how these can be minimised.
3. **Evaluate the risks and consider how the risk of harm can be reduced** - what arrangements, equipment and training etc. will help to avoid accidents or illness?
4. **Record your findings** - on the risk assessment form overleaf. This assessment should form the basis of safe working practices and local rules. Don't just fill in the form and forget it - make sure everyone in your team knows about the risks and how to avoid them.
5. **Review and revise your assessment where necessary** - you should do this when there are significant changes in materials, equipment, work methods, location or people involved. Assessments should also be reviewed if there are accidents, near-misses or complaints associated with the work.

FIELDWORK RISK ASSESSMENT

SCHOOL.....

TYPE OF FIELDWORK.....

(e.g. independent student project, research, supervised field trip)

Dates: From..... To.....

Location(s) of work

Address of residential base

.....

.....

| | (tick boxes) | | Attached |
|---|------------------------------|-----------------------------|------------------------------|
| Risk Assessment completed? | YES <input type="checkbox"/> | NO <input type="checkbox"/> | Y/N <input type="checkbox"/> |
| Suitable travel arrangements and licensed drivers? | YES <input type="checkbox"/> | NO <input type="checkbox"/> | N/A <input type="checkbox"/> |
| Adequate insurance cover | YES <input type="checkbox"/> | NO <input type="checkbox"/> | N/A <input type="checkbox"/> |
| Permission to work on site? | YES <input type="checkbox"/> | NO <input type="checkbox"/> | N/A <input type="checkbox"/> |
| Necessary training and information received | YES <input type="checkbox"/> | NO <input type="checkbox"/> | N/A <input type="checkbox"/> |
| Health and next of kin information given to field trip leader/school office | YES <input type="checkbox"/> | NO <input type="checkbox"/> | N/A <input type="checkbox"/> |
| Provision for disabilities, health problems? | YES <input type="checkbox"/> | NO <input type="checkbox"/> | N/A <input type="checkbox"/> |

Person completing this assessment :

Signature

Name Title/.....

Date..... e.g. undergrad; research student; lecturer

Checked by :

Name Title/.....

Date..... e.g. supervisor; co-ordinator

Approved by Head of School :

Name School...../.....

Date.....

FORM B3 - FIELDWORK RISK ASSESSMENT FORM

FACULTY/MBG DATE

WORK AREA/LOCATION

| TASK - HAZARDS/DEFICIENCIES | RISK* | | | CURRENT CONTROLS | REMEDIAL MEASURES; CONTROLS, ACTION; COMMENTS. (including action date) |
|--|-------------|-------------|-------------|------------------|--|
| | W C O | L I K | L V L | | |
| Physical (e.g. extreme weather, mountains) | | | | | |
| ----- Biological (e.g. aggressive animals, insects) | ---- | ---- | ---- | ----- | ----- |
| ----- Chemical (e.g. on site, pesticides etc) | ---- | ---- | ---- | ----- | ----- |

ASSESSOR SIGNATURE REASSESSMENT DATE

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FACULTY/MBG DATE

WORK AREA/LOCATION

| TASK - HAZARDS/DEFICIENCIES | RISK* | | | CURRENT CONTROLS | REMEDIAL MEASURES; CONTROLS, ACTION; COMMENTS. (including action date) |
|--|-------------|-------------|-------------|------------------|--|
| | W C O | L I K | L V L | | |
| Manmade (e.g. electrical, pipelines,vehicles) | | | | | |
| ----- Personal Safety (e.g. lone working, violence) | --- | --- | --- | ----- | ----- |
| ----- Environmental (e.g. pollution, rubbish) | --- | --- | --- | ----- | ----- |

| TASK - HAZARDS/DEFICIENCIES | RISK* | | | CURRENT CONTROLS | REMEDIAL MEASURES; CONTROLS, ACTION; COMMENTS. (including action date) |
|--|-------------|-------------|-------------|------------------|--|
| | W C O | L I K | L V L | | |
| Emergency Procedures(e.g. fire, first aid, survival aids, communication) | | | | | |
| ----- | --- | --- | --- | ----- | ----- |
| Other (please specify) | | | | | |

ASSESSOR SIGNATURE REASSESSMENT DATE

RISK = WORST CASE OUTCOME X LIKELIHOOD OF OCCURRENCE

HAZARD SEVERITY WORST CASE OUTCOME (WCO): THREE POINT SCALE

MAJOR (MAJ): Condition / Practice Likely to Cause: -

- * permanent disability
- * loss of life
- * loss of body part (to one or more persons)
- * major injury notifiable under Reporting of Injuries, Diseases and Dangerous Occurrences Regulations (RIDDOR) 1985
- * extensive loss of plant or equipment or building
- * dangerous occurrences as specified under RIDDOR.

SERIOUS (SER): Condition / Practice which may Result in: -

- * serious injury or illness resulting in temporary disability to one or more persons, in excess of 3 days
- * damage to plant, equipment or buildings, which result in disruption to normal activities.

MINOR (MIN): Conditions / Practice which may result in: -

- * minor/disabling injury or illness which may involve some lost time (of at least one hour but not more than 3 days)
- * no injury or illness (near miss) but results in some minor disruptive damage to plant, equipment or building property.

HAZARD LIKELIHOOD (LIK): THREE POINT SCALE

HIGH (HIG): Likely to happen. Common, regular or frequent occurrence i.e. daily, several times per day, weekly, every few weeks

MODERATE (MOD): Probable to happen. Occasional occurrence - loss/harm may occur, once a month or several times a year.

LOW (LOW): Possible to happen. Not a frequent/regular occurrence - loss/harm may occur once a year, unlikely but cannot be ruled out.

HAZARD SEVERITY (WCO) THE RISK LEVEL (LVL) (Enter number onto form)

| | | | |
|----------------|--------------------------|-----------------|------------|
| MAJOR | HIGH | HIGH | MED |
| SERIOUS | HIGH | MED | LOW |
| MINOR | MED | LOW | LOW |
| | HIGH | MODERATE | LOW |
| | HAZARD LIKELIHOOD | | |

THE RISK LEVEL - ACTION BY

HIGH IMMEDIATE ACTION REQUIRED, refer Head of School and cancel trip if risk too great

MEDIUM ACTION PRIOR TO TRIP to remove or reduce the risk

LOW Ensure appropriate safety briefing

* NOTE: If Medium or Low risks could affect 50 or more people, use the next higher risk zone for action.