Surf Life Saving Queensland

Water Based Pre-Training Risk Assessment Form

Date		Type of Training: (Please list the type of training you will be conducting)	E.g. Competition, fitness, Bronze
Venue/Beach			
Time of Training	a m / p m		
Number of Participants			

HAZARD ID - Please tick if the hazard is likely to cause harm:

Beach Conditions					
Swell		Tides/Currents		Comments:	E.g. Size of swell? Type of waves?
Wave Type		Time between sets			
Depth of Water		Rips			
Geographic Conditions					
Headland/s		Amount of Beach		Comments:	
Rocks		Beach Conditions			
Climate					
Wind		Storms		Comments:	
Temperature		Lightning			
Other Conditions					
Seaweed		Floating Debris		Comments:	
Marine Stingers		Other Marine Life			

RISK ASSESSMENT

Water Safety – Do you have the required water safety equipment? The SLSQ water safety ratio is one (1) officer to five (5) participants (competition/educational activities). Approximately 50% of these officers shall be on rescue craft.

IRB/s (20+ participants)		Rescue Board/s		Comments:	
Rescue Tube/s		Other			
Number of water safety personnel					
Type of Training – Do the following factors pose a risk?					
Skill with Craft		Endurance (behind the Break)		Comments:	
Break Negotiation		Combination			
Safety Services – What Safety Services do you have access to?					
IRB		Communications		Comments:	
Patrol		First Aid			
Emergency Services					

DETERMINE CONTROL MEASURES – If you have ticked any area above you are required to complete the SLSQ Risk Management Form on the reverse of this form. Following completion of this assessment please indicate below the control measures put in place by the Club.

In light of these factors, what will you do?					
Stinger Drag (Northern clubs only)		Cancel Training		Provide Comments:	E.g. Where will training be moved to? How will you modify training? How long was training delayed for?
Commence Training		Delay Training			
Modify Training		Move Training			

DETAILS OF PERSON COMPLETING THE ASSESSMENT:

Full Name								
Surf Life Saving Club/Service								
Position held at Club (must be one of the following)	Water Safety Supervisor		Activity Leader		Accredited Coach		Training Officer	
Signature								

NOTE: If training is moved to an alternate venue, another pre-training hazard assessment must be completed for the alternate venue.

RISK MANAGEMENT FORM

From policy ADM01 -
Risk Management Policy

Description of Hazard(s) _____

Operation / Tasks at Risk _____

Potential Effects _____

Consequences	**Likelihood**				
	A Almost Certain	B Likely	C Possible	D Unlikely	E Rare
1. Catastrophic	HIGH RISK	HIGH RISK	HIGH RISK	MEDIUM RISK	MEDIUM RISK
2. Major	HIGH RISK	HIGH RISK	MEDIUM RISK	MEDIUM RISK	LOW RISK
3. Moderate	HIGH RISK	MEDIUM RISK	MEDIUM RISK	LOW RISK	LOW RISK
4. Minor	MEDIUM RISK	MEDIUM RISK	LOW RISK	LOW RISK	LOW RISK
5. Insignificant	MEDIUM RISK	LOW RISK	LOW RISK	LOW RISK	LOW RISK

Priority

High Risk: Immediate correction required, consider discontinuing
Medium Risk: Attention needed, correction required
Low Risk: Perhaps acceptable level of risk

Control Options

1. Eliminate the Hazard

2. Minimise the Risk
   - Substitution
   - Modification
   - Isolation
   - Engineering Controls

3. "Back Up" Controls
   - Administrative Controls
   - PPE (Protective Equipment)

Immediate / Temporary Control:

Long Term Control:

Assessed by: _____ Date: / /

Completed form submitted to _____ Date: / /