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| **Activity: Map-based Activities** | Version: |  1 | Date: | May 2019 |

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| **Value of this activity – what do we hope to achieve?** |  |
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| **General Risk Assessment**  |

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| **Harm** | **Hazard** | **Risk** **Rating?**How serious? | **Controls** | **Check**Controls Implemented?Reviewed? | **Residual Risk Rating?**  |
| What could go wrong? | Why would this happen? | How can it be prevented? First try to e)liminate, then m)inimise the riskWho is responsible for implementing the control? |
| Collison between a participant and a motor vehicle resulting in death or injury | Participant on or crossing a road, driveway or track used by motor vehicles | **High** | **Organisation** Activity areas or courses planned to avoid any roads, driveways, tracks etc. (e) Roads and crossing points clearly marked on maps (m)Signage used to warn traffic (m)**Leader** Adult helpers used to marshal any roads, driveways, tracks etc. that form the boundary to any areas used to prevent participants going “out of bounds” (e)Where road crossings are required, these have designated crossing points that are manned by adult helpers (m)Participants well briefed (m) |  |  |
| Injury from a collision with a mountain bike | Participant hit by a mountain bike | **High** | **Organisation** Activity areas or courses planned to avoid tracks used by mountain bikes (e)Signage used to warn mountain bikers (m)**Leader** Adult helpers used to marshal any shared use areas (m)Participants well briefed (m) |  |  |
| Hypothermia | Cold, windy, wet weather, inadequate clothing | **High** | **Organisation** Avoid doing activity on cold/wet/windy days (e)**Leader** Monitor participants (m)Ensure participants are dressed for the conditions (m)Have spare clothing and shelter available (m)Have hot drinks and snacks available (m) |  |  |
| Hyperthermia (overheating) / Dehydration | Hot weather (strong sun, no breeze) &/or overexertionParticipant not drinking in hot weather | **High** | **Organisation** Avoid doing activity on extremely hot days (e)**Leader** Ensure participants have plenty to drink, use sun hats & sun screen and choose shady sites, where possible (m)Adjust activity to weather conditions (m)Extra water, spare sun hats & sun-screen available (m)Monitor participants regularly (m) |  |  |
| Medical event | Pre-existing Medical Condition | **High** | **Organisation** Ensure appropriately competent staff - First Aid minimum (m) Collect accurate and current medical information (m)**Leader** Ensure personal medication is carried and supervisors know where the medication is and how/ when to administer it (m) |  |  |
| Allergic reaction or anaphylaxis  | **High** | **Organisation** Ensure appropriately competent staff - First Aid minimum (m)Collect accurate medical information from participants prior to activity (m)**Leader** Tape off areas of poisonous plants or wasps (e)Plan courses to avoid areas of poisonous plants (i.e. ongaonga) or wasps. Show participants and example of ongaonga so they know what to avoid (m)Ensure participant carries appropriate medication & that others know how to administer (m)  |  |  |
| Injury – strains and sprains | Uneven ground, rooty and rocky ground, steep ground, unstable groundClimbing obstructions (e.g. fencesInappropriate footwear | **Medium** | **Organisation** Courses designed to avoid hazardous terrain and obstructions in relation to the skill/ physical ability level of participants (m)**Leader** Participants briefed (m)Participants wearing suitable footwear for terrain (m) |  |  |
| Injury - cuts, grazes, bruises etc | Slippery or steep groundVegetation | **Medium** | **Organisation** Courses designed to avoid areas of terrain or vegetation likely to cause problems (m)**Leader** Cancel or modify activity when ground is very slippery (e) |  |  |
| Injury  | Farm animals |  | **Organisation** Avoid areas with stock (e)Clearly mark areas with stock on maps as out of bounds (m)**Leader** Brief participants (m) |  |  |
| Emotional distress | Participants become lost or separated from their group | **Medium** | **Organisation** Choose an activity area suitable for participants skill and experience level (m)**Leader** Participants briefed on what to do if becoming lost or separated (m) |  |  |
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| **Reviewed:** |  | **Date:** |  | **Approved:** |  | **Next Review:** |  |

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| **Site Specific Hazard Analysis:**  | By: |  | Date: |  |

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| Site Specific Hazards - What else could go wrong (at this site)? | Management - How can we control this? |
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|  Specific Hazards on the Day- What could go wrong at this site?1. On this day (weather, ground surface etc)2. With these people (participants, staff etc)  | Management - How can we control this? |
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| Past Incidents- Any learnings to note? | Management - How can we control this? |
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| **Leadership and Supervision plan:**  | By: |  | Date: |  |

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| Supervision Requirements | - Consider the risk assessment and staff required to manage this activity safely | Contact details (mobile phone no./radio no. etc) |
| Who is in charge of the activity? (The Leader) |  |  |
| Who are assisting the leader? |  |  |
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| Staff CompetencyNames | Are there any designated roles based on skills/competency (e.g. first aider, cook, driver etc) |  |
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| **Emergency Communication Plan:**  | By: |  | Date: |  |

*This component should help users of the guide to consider site specific characteristics of their activity including details about evacuation procedure, communications (cell coverage), emergency resources and options that are available at the site.*

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| Assistance |
|  | Detail | Location | Phone |
| Emergency | **Police, Fire or Ambulance** |  | 111 |
| Police | **Non-emergency** |  | 105 |
| Police | from **Sat Phone** | North Comms (covers New Zealand north of Turangi):  | +64 9 571 2800  |
| Central Comms (covers North Island south of Turangi):  | +64 4 381 2000 (ask for Comms) |
| South Comms (whole of the South Island):  | +64 3 363 7400 (ask for Comms). |
| Xxxx Hospital |  |  |  |
| Nearest Medical Centre | Open hours? |  |  |
| 24 Hour Surgery | 24 hrs |  |  |
| Urgent Pharmacy |  |  |  |
| Poison Centre |  |  | 0800 POISON (0800 764 766) |

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| Organisation contacts |
|  | Name | Email  | Phone |
| Organisation | Office PhSat Phone |  |  |
| Duty Manager | Names of people who will need to know about an emergency (who are not next of kin) |  |   |
|  | On Call Phone |  |  |
| Legal |  |  |  |
| Insurance |   |   |   |

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| **Participant details/register:**All participants including leaders, assistants, parents, helpers | By: |  | Date: |  |
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| Participant Name | Role | Emergency Contact (next of kin, guardian, spouse etc) | Address | Phone | Critical Personal information |
|  | e.g. participant, leader, parents/guardians,  |  |  |  | Allergies, disabilities, medical conditions, medications carried etc |
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| **Site/Area Map:**  | By: |  | Date: |  |

**Site/Area Map.** *Draw, paste or attach in a map, diagram or photo of your site and note the following (if relevant): access points, hazard/out of bounds areas, emergency evacuation/exit points, key locations, locations of landline phones/areas with/without cell reception, emergency service access points and addresses/heli landing area, traffic/parking areas, toilets, water sources, emergency meeting areas, activity areas, drinking water sources, flammable storage areas.*

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| **Resources and Equipment:**  | By: |  | Date: |  |

*A summary of the resources and equipment that are essential for running the activity safely and distinct from generic outdoor activity equipment. Add to these for the specific event.*

* Participant
* Group
* Leader
* Emergency

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| **Post Event Review:**  | By: |  | Date: |  |

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| Post Trip Review- Critical learnings from this trip and previous trips  |  |
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