###### FIELD COURSE HAZARD & RISK ASSESSMENT

###### AND EMERGENCY RESPONSE PLAN

The aim of this document is to collate key information into a simple format for use in the event of an incident. Please complete white boxes and return to the Head of School for approval.

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| **Staff involved in trip** |
| Name | Role (e.g. leader) | Mobile /email | Date of first aid training |
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| **Group Composition** |
|  | Male  | Female |
| Staff (incl. ATs) |  |  |
| Students |  |  |

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| **Description of itinerary / activities** |
| Date & location | Activities  | Specific risks (include in risk assessment below) |
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| **Local contacts (incl. accommodation details)** |
| Name & role | Address | Number / email |
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| **Insurance arrangements** |
| Staff & students | University scheme |

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| **For office use** | **Yes** | **No** | **n/a** |
| Safety information provided to students |  |  |  |
| Emergency response plan completed  |  |  |  |
| Hazard and risk assessment completed |  |  |  |
| Insurance forms completed |  |  |  |
| Signed (Head of School) |  |
| Date |  |

**FOR ALL FIELD CLASSES**

All staff should familiarise themselves with *Guidance on Safety in Fieldwork* (UCEA, 2011).

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| **General information** |
| Pre-field class procedures |  |
| Staff: student ratio |  |
| Supervision and mode of field working (e.g. use of demonstrators, lone / group / night working) |  |
| Modes of transport |  |
| First aid provision |  |
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| **Safety information provided to students** |
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**EMERGENCY RESPONSE PLAN**

**FOR OVERSEAS FIELD CLASSES ONLY**

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| **Emergency contact details in the UK** |
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| **Emergency contact details for students** |
| Student name & nationality | Airline (and US partner) | Next of kin (NOK) form received: Y/N |
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| Confirm where copies of passports stored: | Confirm where copies of flight itinerary stored: | Confirm where copies of NOK stored: |
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| **Primary medical evacuation route from capital / central city** |
| City name |  |
| Main hospital:outline facility name, address, contact numbers and capability. |  |
| Safe location for course to regroup in the case of an incident |  |
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| **Medical facilities outside capital / central city** |
| Date and location (include all locations listed above) | Name of hospital/clinic, location & distance from field course activity | Contact telephone |
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| **Protocols** |
| Communications policy (e.g. in the field, between groups, whilst travelling, at accommodation) |  |
| Procedure to be followed in the event of an incident |  |

**HAZARD AND RISK ASSESSMENT**

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| **Specific Activity** | **Hazard** | **Who Could be Affected?** | **How?** | **Risk****Controls** | **Rating\*** | **Is Residual Risk Tolerable? (Yes or No)\*** |
| S | L | R |
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\* Ratings – (S) Severity, (L) Likelihood, (R) Residual Risk

\* Is Residual Risk Tolerable – Risks rated above 16 are not tolerable. For risks rated above 11, further controls should be introduced and the risk re-assessed. If risk remains above 11 then specialist advice should be sought PRIOR to the activity going ahead.

S = Severity Rating L = Likelihood of occurrence and is graded as follows:

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| Severity Rating | Outcome: |  | Likelihood Rating | Outcome: |
| 1 | No lost time |  | 1 | Unlikely to occur |
| 2 | Under 3 day injury |  | 2 | Unlikely to occur more than once per year  |
| 3 | Over 3 day injury |  | 3 | Could occur at some time during the year |
| 4 | Major Injury (broken bones, loss of limb, incapacity leading to lost time over 1 month) or financial loss to University up to £50k |  | 4 | Could occur every time the activity is carried out |
| 5 | Death or financial loss to the University greater than £50k |  | 5 | Will occur every time the activity is carried out |

R = Risk Rating = Severity x Likelihood of occurrence

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| Risk Rating | Required Actions |
| 1 – 5 | Very Low. Monitor to ensure that risk assessment is accurate |
| 6 – 10 | Low. Reduce risk as low as reasonably practicable. Monitor to ensure that risk assessment is accurate. |
| 11 – 15 | Medium. Undertake cost benefit analysis to decide whether control measures are required to further reduce risk. Monitor and review at least annually. |
| 16 -20 | High. Risk is intolerable. Additional control measures may be required. At the very least a safe system of work will need to be identified and implemented before the task can be undertaken. |
| 21 – 25 | Very High. Risk is intolerable. The task must not be undertaken. Additional control measures will be required. |