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| https://www-p.unisa.edu.au/styleguide/logos/images/logo_unisa_RGB-blue.png | FIELDWORK DETAIL This form supports the WHS Fieldwork Safety Procedure | WHS71 |
| **Completed by: Unit/Institute: Date:**  |

This form can be expanded electronically or extra information attached.

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| This form is to be prepared by the **Fieldwork Coordinator** and **must** be completed for all multi-day fieldwork activities**.**A daytrip will require less detail and this information could be provided in email to the Contact Person. A copy of the complete document is to belodged with \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ [**Nominated Contact Person**] prior to departure*.*A copy of the completed document should be held by the **Fieldwork Leader** while on the activity.  |
| **GENERAL DETAILS** |
| Fieldwork type | Day-trip Camp Study tour Teaching Research Other:  |
| Fieldwork location  |  | Fieldwork activity |  |
| Departure date & time |  | Return date & time |  |
| Fieldwork Coordinator |  | Course |  |
| Fieldwork Supervisor  |  | Contact No |  |
| Description of field trip |
| Have environmental, physical or other hazards been considered in managing safety risks?  |  |
| Overall level of health and safety risk associated with activity |  High | Medium | Low |
| PARTICIPANT INFORMATION List all participants, including staff and volunteers  |
| **Name** | **Student Id** | **\*Relevant medical information** | **Emergency contact person/next of kin** | **Phone number** |
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| \*confidential medical information: please advise Fieldwork Coordinator directly |
| CONTACT PERSON: to be notified of significant incident or emergency situation |
| **Name:**  | **Phone:**  |
|  |
| **ITINERARY / OVERNIGHT LOCATIONS** |  **Map used:**  |
| **Itinerary** | **Location description** | **Grid Referenceif applicable** | **Date** |
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| **CONTACT & COMMUNICATION DETAILS contacts / means & schedule of contact:**  |
| **Role** (eg) | **Name** | **Mobile Number** | **Satellite Number** | **Contact Schedule** |
| Contact Person |  |  |  |  |
| Fieldwork Coordinator |  |  |  |  |
| Park Ranger |  |  |  |  |
|  |  |  |  |  |
|  **Note:**  Mobile phones should not be relied upon. Satellite phones are recommended for remote areas |
| **EMERGENCY RESPONSE PLAN & CONTACTS** |
| 1. Manage situation [which may include - providing first aid, initiate immediate local search, control group] 2. Call for assistance [appropriate agency as required: Ambulance, Police, National Park]3. Notify UniSA Nominated Contact Person [page 1]. Detail any actions you need this person to complete4. Provide updates as you are able to.**List of contacts for potential use in an emergency situation:** |
| **FACILITY** | **LOCATION** | **CONTACT (phone)** |
| Hospital /or Nearest Medical  |  |  |
| Police |  |  |
| National Park  |  |  |
| Unit / Institute (Director/General Manager)  | call if Nominated Contact is unavailable |  |
| UniSA Security |  |  |
| Other:  |  |  |
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| **ATTACHMENTS** attach any relevant documents  |
| * Maps - Detailed itineraries - Risk assessment - Fieldwork Detail (WHS 72) - Other
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