

# TRAINING RISK ASSESSMENT



Trainer/Assessor

Date

## 1. Adverse effects on safety

<u>Environmental</u>	N/A	Caution	Change	Stop
Tides/currents	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Swell Size	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Wave Type	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Time between sets	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Depth of water	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Beach configuration	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Geography/topography	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Beach composition	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Beach debris	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Water Quality	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Weather	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Wind	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Temperature	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Available Light	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<u>Manmade</u>	N/A	Caution	Change	Stop
Structures	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Coastal defences	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Hazardous substances	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<u>Human</u>	N/A	Caution	Change	Stop
Beach/water population	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Activities/events	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Behavioural	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Vulnerable groups	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other water users	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

## 2. Considerations and variables

<u>Training/assessment task</u>	Yes	No
IRB	<input type="checkbox"/>	<input type="checkbox"/>
RWC	<input type="checkbox"/>	<input type="checkbox"/>
Board paddle/rescue	<input type="checkbox"/>	<input type="checkbox"/>
Surf swim	<input type="checkbox"/>	<input type="checkbox"/>
Tube rescue	<input type="checkbox"/>	<input type="checkbox"/>
Scenario/Mass rescue	<input type="checkbox"/>	<input type="checkbox"/>
ATV/4WD	<input type="checkbox"/>	<input type="checkbox"/>
Other _____	<input type="checkbox"/>	<input type="checkbox"/>
<u>Student groups</u>	Yes	No
<17 Years old	<input type="checkbox"/>	<input type="checkbox"/>
Adult (new lifeguards)	<input type="checkbox"/>	<input type="checkbox"/>
Adult (returning lifeguards)	<input type="checkbox"/>	<input type="checkbox"/>
<u>Safety services</u>	Yes	No
Safety Cover	<input type="checkbox"/>	<input type="checkbox"/>
Lifeguard Service	<input type="checkbox"/>	<input type="checkbox"/>
IRB/RWC	<input type="checkbox"/>	<input type="checkbox"/>
First Aid Equipment	<input type="checkbox"/>	<input type="checkbox"/>
Communications	<input type="checkbox"/>	<input type="checkbox"/>
Access to emergency services	<input type="checkbox"/>	<input type="checkbox"/>
<u>Options</u>	Yes	No
Consult with trainers and/or Lifeguards	<input type="checkbox"/>	<input type="checkbox"/>
Continue/Commence/Delay Training/Assessment	<input type="checkbox"/>	<input type="checkbox"/>
Modify session/assessment	<input type="checkbox"/>	<input type="checkbox"/>
Change of venue (selected tasks)	<input type="checkbox"/>	<input type="checkbox"/>
Cancellation of selected tasks	<input type="checkbox"/>	<input type="checkbox"/>
Cancel	<input type="checkbox"/>	<input type="checkbox"/>

## Severity/Probability Matrix

Key	Trivial	Minor	Major	SUGGESTED ACTION
Unlikely - So unlikely, probability is close to zero	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	OK to proceed with caution
Probable - Not surprised it will occur sometime	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Certain - Occurs repeatedly only to be expected	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Modify/delay or change
Trivial - Session runs to plan but may cause minor injury/s	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Minor - Conditions prevent running to plan and cause moderate injury	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Cancel
Major - Conditions prevent training outcomes & guarantee major injury/death	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Keep a copy of this form with your training records

### 3. Action Plan

### 4. Indicators for change and review

Yes No

Training session/assessment not running to session plan

Minor equipment damage

Injury - minor

Major equipment damage

Loss or destruction of equipment

Injury - major

Death of student

Other \_\_\_\_\_

### 5. Review of action plan

### Comments

Trainer Signature

Assessor Signature