

RISK ANALYSIS AND MANAGEMENT SYSTEM

NAME & SIGNATURE: Peter Gould

DATE: 30/04/2024

ACTIVITY NAME: ANT MAZE

LOCATION DESCRIPTION: APPROXIMATELY 10M FROM SOUTH SIDE OF MAIN LODGE

RUN/OPERATED BY (CIRCLE): CAMP STAFF TEACHER / LEADER

RISK DESCRIPTION	EXISTING CONTROLS	RATING			TREATMENT PRIORITY	TREATMENT
Describe the risk event, cause/s and consequence/s. For example, Something occurscaused byleading to	Describe any existing policy, procedure, practice or device that acts to minimise a particular risk	Effectiveness of existing controls	Risk Consequences	Risk Likelihood	If control effectiveness is poor or unknown provide further treatment.	For those risks requiring treatment in addition to the existing controls. List: What will be done? Who is accountable? When will it happen?
Falls due to campers slipping from teammates support leading to bruising and abrasions.	 Constant 1:12 teacher/leader to camper supervision ratio. Certified fall mulch is in place under activity. Detailed safety briefing by camp staff before commencing. Daily maintenance checklist completed prior to activities being used. 	Satisfactory Poor Unknown	Major Moderate Minor Insignificant	Almost certain Likely Unlikely Rare	High Medium Low	
Sun burn	Strict clothing and sun screen policy in place. Significant shady trees cover activity. Full time teacher/leader supervision	Satisfactory Poor Unknown	Major Moderate Minor Insignificant	Almost certain Likely Unlikely Rare	High Medium Low	