

RISK ANALYSIS AND MANAGEMENT SYSTEM

NAME & SIGNATURE: Peter Gould

DATE: 30/04/2024

ACTIVITY NAME: PLANT PROPAGATION

LOCATION DESCRIPTION: MOBILE ACTIVITY, CAMPFIRE AREA OR GRASS AREA APPROXIMATELY 5M ON NORTH

SIDE OF 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?
Sun burn	Strict clothing and sun screen policy in place. Full time teacher/leader supervision	Satisfactory Poor Unknown	Major Moderate Minor Insignificant	Almost certain Likely Unlikely Rare	High Medium Low	
Illness due to handling potting mix	 Supply of hand shovels to minimise contact with soil Strict hand washing policy after completion of activity 	Satisfactory Poor Unknown	Major Moderate Minor Insignificant	Almost certain Likely Unlikely Rare	High Medium Low	