



Application for Authority to Conduct an Activity (Risk Assessment)

R1
V20151013

Use of this Form

This form is to be sent by the Group Leader/Section Leader to the Leader/Commissioner responsible for approving the activity, taking note of lodgment dates for applications as specified in Safety Standards and Procedures

Leaders should specifically take note of Overnight Activity permissions for their section as outlined in Safety Standards and Procedures

Leaders must be conversant with, and comply with, all rules and regulations as laid down in the current edition of Policy and Rules and also the current documents relating to Safety Standards and Procedures

This form shall be completed in full, endorsed by the Approving Leader, copied and returned to the activity Leader to keep on file.

Activity Details

Formation/Scout Group		Section	
District		Region	Branch

Type of Activity <small>Major Outing / Camp / Hike / Sleepover / etc (please specify)</small>	
Activity Venue <small>(Name of Activity Site)</small>	
Venue Location / Address	

Period of Activity	Commencing <small>(date)</small>		Time		AM	PM
	Concluding <small>(date)</small>		Time		AM	PM

Formation Leader						
Appointment				Membership Number		
Address						
Suburb		State		Post Code		
Home Phone		Work Phone		Mobile Phone		
Email						

Person in Charge of Activity						
Appointment				Membership Number		
Address						
Suburb		State		Post Code		
Home Phone		Work Phone		Mobile Phone		
Email						

Anticipated number of Leaders attending	Male		Female	
Anticipated number of Adult Helpers attending	Male		Female	
Anticipated number of Parent Helpers attending	Male		Female	
Anticipated number of Youth Members attending	Male		Female	
Adult to Youth ratio				

Activity

Adventurous Activity			
Supervisor / Operator		Membership Number	

Adventurous Activity			
Supervisor / Operator		Membership Number	

Adventurous Activity			
Supervisor / Operator		Membership Number	

Adventurous Activity			
Supervisor/ Operator		Membership Number	

Adventurous Activity			
Supervisor / Operator		Membership Number	

Adventurous Activity			
Supervisor / Operator		Membership Number	

If the Activity Leader is not a member of the Association, please include the Company or individual details below and attach a copy of their current Certificate of Currency for Public Liability Insurance.			
Company or individual name			
Address			
Contact phone numbers			
Public Liability Insurance Company			
Policy Number		Expiry Date	

Leader Responsible

I confirm that all participants including Parents/Guardians of youth participants involved in this activity will be advised in writing of the activity and permission will be obtained <u>before</u> the activity commences. I have reviewed and completed the 'Risk Management Plan' (attached) for all aspects of the planned activity and control measures will be implemented prior to the activity commencing. I also confirm that the supervisors of each Adventurous Activity component are either registered as Activity Leaders with the Association and have completed a 'Risk Management Plan' or have provided their Public Liability Insurance Certificate of Currency.			
Leader Responsible	Signed		Date
Printed Name			

Formation Leader

I approve the activity and confirm that the Leader responsible will collect permission forms two weeks prior to the commencement of the activity and that a 'Risk Management Plan' has been undertaken and that control measures have been identified.			
Group Leader	Signed		Date
Printed Name			

For Section or Group Events Only**District Commissioner Authorisation (for Risk Rating of 'Significant' or 'High')**

I have checked the attached details and approve the 'Risk Management Plan' that the Leader Responsible has undertaken for this activity and that control measures have been identified.			
District Commissioner	Signed		Date
Printed name			

For District, Region and Branch Events Only

Branch Commissioner Scoutsafe Authorisation (for Risk Rating of 'Significant' or 'High')

I have checked the attached details and approve the 'Risk Management Plan' that the Leader Responsible has undertaken for this activity and that control measures have been identified.

BC Scoutsafe (bc.scoutsafe@scoutswa.com.au)	Signed		Date	
Printed name				

A MINIMUM TWO (2) WEEKS NOTICE MUST BE PROVIDED FOR SECTION OR GROUP EVENTS A MINIMUM OF EIGHT (8) WEEKS NOTICE MUST BE PROVIDED FOR DISTRICT, REGION OR BRANCH EVENTS

An Application for Authority to Conduct an Activity (R1) form, including the 'Risk Management Plan' MUST be completed for ALL Scouting activities / outings involving youth and/or adult members where the activity is undertaken AWAY from the registered Scout Hall or meeting place for the Section.

Instructions

- Leader Responsible completes the Activity Information, prepares the 'Risk Management Plan' and attaches separate Risk Management Plans for any/all Adventurous Activities being conducted during the activity.
- Leader Responsible forwards completed form(s) to the Formation Leader who must approve all activities and sign accordingly.

For Section and Group Events Only:

Formation Leader MUST return signed R1 form(s) to the Leader Responsible and forward a copy of the form(s) to District Commissioner (**minimum of 2 weeks notice required**).

- District Commissioner checks and confirms:
 - Leader Responsible is suitably qualified
 - Adventurous Activity Supervisor is a registered Activity Leader
 - External provider has produced Public Liability Insurance Certificate of Currency (if applicable)
 - Risk Management Plan(s) are completed
- District Commissioner MUST approve activities that have a Risk Rating of 'Significant' or 'High' by signing and returning a copy of the approved form(s) to the Leader Responsible via the Group Leader.
- If the activity is outside the District, the source District Commissioner MUST forward details of the activity to the District Commissioner responsible for the venue location of the activity (email advice, facsimile, or post copy of completed form).
- District Commissioner MUST retain a copy of all completed R1 forms for audit purposes.

For District, Region and Branch Events Only:

Formation Leader MUST return signed R1 form(s) to the Leader Responsible and forward a copy of the form(s) to Branch Commissioner Scoutsafe (**minimum of 8 weeks notice required**).

- Branch Commissioner Scoutsafe checks and confirms:
 - Leader Responsible is suitably qualified
 - Adventurous Activity Supervisor is a registered Activity Leader
 - External provider has produced Public Liability Insurance Certificate of Currency (if applicable)
 - Risk Management Plan(s) are completed
- Branch Commissioner Scoutsafe MUST approve activities that have a Risk Rating of 'Significant' or 'High' by signing and returning a copy of the approved form(s) to the Leader Responsible via the Formation Leader.
- The Branch Commissioner Scoutsafe MUST forward details of the activity to the District Commissioner responsible for the venue location of the activity (email advice, facsimile, or post copy of completed form).
- Branch Commissioner Scoutsafe MUST retain a copy of all completed R1 forms for audit purposes.

An activity can only proceed if the Leader Responsible has received signed approval from the Formation Leader and District Commissioner or BC Scoutsafe (if applicable).

Leader Responsible means an Adult Member of Scouting who holds a current 'Certificate of Adult Leadership' or 'Certificate of Appointment'.

Person in Charge means a person in charge of the activity who will be in attendance for the duration of the activity (may be a Patrol Leader, Venturer or Parent, appointed by the Leader Responsible on page 1 of the R1 form).

Risk Management Plan means the Plan at page 5 of the R1 form completed according to the instructions at page 4 in relation to general risks associated with the activity, but not in relation to specific Risks associated with an Adventurous Activity. The Adventurous Activity Leader is responsible for completing a separate Risk Management Plan for the particular Adventurous Activity and providing their Risk Management Plan to the Leader Responsible.

Instructions

1. Details (Section 1)

- a. Complete the details relating to the activity.

2. Analyse & Assess Risk (Section 2)

- a. Consider the hazards and the Injury / Danger likely to occur associated with your particular activity and include in the Hazard and Injury / Danger columns.

Hazard: A source of harm with the potential to cause injury or loss.

Eg: **Hazard** **Injury / Danger**
 The Lake Drowning
 Gravel ground Falling / Tripping

- b. Using the 'Risk Calculator' chart, select the consequence most likely to apply to the hazard and write it in column A.
- c. Using the chart below, choose the likelihood associated with the hazard and write in column B.
- d. Calculate the risk level for each Hazard using the chart below and write in the Risk Rating column.

Eg: Consequence = A3 (Moderate)

Likelihood = B3 (Possible)

Risk Rating = Significant (S)

3. Manage the risk (Section 2)

- a. List ways in which you could manage the risk and write these in the 'Controls' column.
- b. With the controls in place, re-calculate the Consequences (A), and the Likelihood (B) for each Hazard.
- c. Re-calculate the Risk Rating and completed the 'Residual Risk Rating' column.
- d. The highest rating you have in the 'Residual Risk Rating' column becomes the risk rating for the activity. Add this to the 'Risk Rating for the Activity' section.

4. Approvals (Section 3)

- a. Leader in Charge of the Activity must certify that they have undertaken the Risk Management Plan to the best of their ability.
- b. All activities require Group Leader approval.
 Activities with a Residual Risk Rating of 'Significant' or 'High' also require District Commissioner approval.

Risk Rating

LIKELIHOOD (B)	CONSEQUENCES (A)				
	A1 INSIGNIFICANT VERY LITTLE EFFECT	A2 MINOR FIRST AID	A3 MODERATE TREATMENT REQUIRED	A4 MAJOR HOSPITALISATION	A5 CATASTROPHIC FATALITY
B1 RARE	LOW (L)	LOW (L)	MODERATE (M)	SIGNIFICANT (S)	SIGNIFICANT (S)
B2 UNLIKELY	LOW (L)	LOW (L)	MODERATE (M)	SIGNIFICANT (S)	HIGH (H)
B3 POSSIBLE	LOW (L)	MODERATE (M)	SIGNIFICANT (S)	HIGH (H)	HIGH (H)
B4 LIKELY	MODERATE (M)	SIGNIFICANT (S)	SIGNIFICANT (S)	HIGH (H)	HIGH (H)
B5 ALMOST CERTAIN	SIGNIFICANT (S)	SIGNIFICANT (S)	HIGH (H)	HIGH (H)	HIGH (H)

RISK MANAGEMENT PLAN

This Risk Management Plan must be attached to the Application for Authority to Conduct an Activity R1 form.

Section 1 – Activity Details

Group		Section	
Activity		Activity Dates	

Section 2 – Analyse, Assess & Control the Risks

ANALYSE & ASSESS RISKS					MANAGE THE RISKS			
HAZARD	INJURY / DANGER	A	B	RISK RATING	CONTROLS	NEW A	NEW B	RESIDUAL RISK RATING
1								
2								
3								
4								
5								
6								
7								
Risk Rating for the Activity (Highest Residual)								

Section 3 – Approval of Risk Management Plan

Leader Responsible			
Signed		Date	

Group Leader			
Signed		Date	

For Section or Group Events Only

District Commissioner			
Signed		Date	

For District, Region or Branch Events Only

Branch Commissioner Scoutsafe			
Signed		Date	