

Activity description & Location: Archery - Grounds

Use rating: **C**

(see guide opposite)



- Use:**
- A** Must be operated by Baptist Camping Victoria qualified staff
 - B** In house training at Baptist Camping Victoria required before using this equipment
 - C** Safe operating procedures must be read and adhered to by all users of this equipment
 - D** Does not apply

	Initial Matrix Level	Comments (when and where hazard is present)	Control Description (Current & proposed)	Revised Matrix Level
Activity/Task Hazard Identification				
Is there potential for?				
<input checked="" type="checkbox"/> Being cut or stabbed	M	Sharp edges on target, arrows	Use gloves, establish boundaries, ensure supervision, keep onlookers clear, do NOT climb any structure, do Landscaper to ensure even ground, do not run when collecting arrows, be aware of other participants, ensure first aid is available	L
<input checked="" type="checkbox"/> Struck, crushed or entangled	M	Target fall, shed collapse		L
<input type="checkbox"/> Electric Shock				
<input checked="" type="checkbox"/> Manual Handling/ergonomics	M	Use of bow & carrying arrows		L
<input checked="" type="checkbox"/> Infectious agents or materials	L	Splinters, wood cuts		L
<input checked="" type="checkbox"/> Slip, trip, fall	M	On equipment or ground, retrieving arrows from trees, roofs, etc.		L
<input type="checkbox"/> Other factors – specify: _____				
Workplace Conditions Hazard Identification				
Is there potential for?				
<input checked="" type="checkbox"/> Extremes of temperature	M	Exposure to the elements	Wear appropriate clothing	L
<input type="checkbox"/> High wind or humidity				
<input type="checkbox"/> Inadequate light				
<input type="checkbox"/> Dust, fumes or vapours				
<input checked="" type="checkbox"/> Exposure to UV or other radiation	M	Sunburn	Slip, slop, slap	L
<input type="checkbox"/> Emergency situations				
<input type="checkbox"/> Other factors – specify: _____				
Environmental Aspects Hazard Identification				
Is there potential for?				
<input type="checkbox"/> Energy consumption				
<input type="checkbox"/> Nuisance noise				
<input type="checkbox"/> Dust				
<input type="checkbox"/> Water consumption				
<input type="checkbox"/> Hazardous waste				
<input type="checkbox"/> Hazardous emissions				
<input type="checkbox"/> Other factors – specify: _____				

Comments/controls yet to happen: _____