**Purpose:** The purpose of this plan is to ensure a safe workplace for all Curtin University staff and students while driving vehicles outside of the outer metropolitan area (refer Department of Health, Health Workforce Locator), skippering watercraft or using charter vehicles/flights.

***Please note:*** *Workers who do not have a salary packaged motor vehicle and seek the use of a motor vehicle for University purposes will use a Fleet 1 vehicle. If a Fleet 1 vehicle is not available and there is no appropriate alternative (e.g. taxi), only then may a Head of School/Area authorise the use of a private motor vehicle****. Private vehicles will not be covered by University vehicle insurance.***

**Instructions:** Complete 1 form per driver per vehicle prior to the trip. Add the total score for section E to determine who should approve the trip. The form should then be approved by the relevant person and sent to your fieldwork coordinator or placement office for storage.

|  |  |  |  |
| --- | --- | --- | --- |
| **Section A – To be completed for all trips when travelling outside of the outer metropolitan area** | | | |
| Driver: | Write driver name here | Emergency Contact: | Name: Contact Number: |
| ID Number: | Write ID number here | Manager/Supervisor: | Name: Contact Number: |
| Reason for travel: | Write reason here | Commencement: | Date: Time: |
| Destination: | Destination name | Return: | Date: Time: |
| **Section B - To be completed for all trips when travelling outside of the outer metropolitan area** | | | |
| Itinerary  (Attach copy): | Locations | Planned Communication Time/s: | Call times: |
| Route (Attach map with route marked) | Map Link | Planned Communication Location/s: | Call locations: |
| Communication Method: | Phone-call/text/other | Escalation Plan: | Insert details |
| Curtin Emergency Notification Plan –  Domestic or International: | | Completed and attached:  Yes  No | |

|  |  |
| --- | --- |
| **Section C - Only to be completed for charter trips** | |
| Charter vehicles/boats with supplied drivers/skippers are being used for this trip (If yes, move to Section F.) | Yes  No |
| Charter aircraft (all types) supplied with pilots are being used for this trip. All mitigates below are required to be in place before the charter can be approved:   1. The company CASA Safety Rating is current and approved for the aircraft being used 2. If there have been any recent safety events involving the aircraft review the outcome and actions put into place by the charter company to assure Curtin that they were appropriate 3. Is the minimum standard size for chartered plane 10 seats, twin engine. (Curtin minimum size) 4. Travel Operations has been notified of the chartered plan schedule (where practicable) | Yes  No  Yes  No  Yes  No  Yes  No  Yes  No |

**Driver Acknowledgement:**

|  |  |  |
| --- | --- | --- |
| **Section D – To be completed for all trips outside the outer metropolitan area (except where section C has been completed)** | | |
| **Item** | **Details** | **Acknowledgement** |
| 1 | I hold the relevant licenses/tickets, the vehicle is registered and I have received training to safely operate the vehicle | Yes  No |
| 2 | I will be fit to drive, well rested and alert, not under the influence of drugs, alcohol, medications or other substances that may impair my ability to drive/skipper. | Yes  No |
| 3 | I agree to check the weather and traffic conditions prior to commencing and as required during the trip. | Yes  No |
| 4 | My vehicle is configured and equipped to handle the weather and road conditions I may encounter. | Yes  No |
| 5 | I have allowed enough time to complete this trip based on road, weather and traffic conditions at the time of the trip. | Yes  No |
| 6 | Does this vehicle contain mechanical faults? If so, it should not be used for the trip and alternative vehicle sourced. | Yes  No |

**Risk Assessment:**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Section E – To be completed for all trips outside the outer metropolitan area (Tick appropriate boxes)** | | | | | |
| **Vehicle Type** | **Score** | **Vehicle Condition** | **Score** | **Total Vehicles** | **Score** |
| 4 x 4 (Ute or wagon) | 1 | Service current & no faults or hire vehicle | 0 | 2 or more in convoy | 1 |
| Light truck, or 2WD (van or sedan) | 3 | Service overdue | 3 | 1 only | 3 |
| Other vehicle (boat, motorbike etc) | 5 |  |  |  |  |
| **Towing Trailers/Boats** |  | **Number of Drivers/Skippers** |  | **Non-Driving Passengers Present** |  |
| No | 1 | Multiple per vehicle | 1 | No | 1 |
| Yes | 3 | One per vehicle | 3 | Yes | 3 |
| **Time on Road** | **Score** | **Road/Water Condition** | **Score** | **Route** | **Score** |
| Less than 2 hours one way | 1 | Sealed road /calm waters expected | 1 | Familiar | 1 |
| 2- 4 hours one way | 3 | Unsealed (graded surface) or choppy waters expected | 3 | Limited knowledge, communications plan in place | 3 |
| 4+ hours one way | 5 | Unsealed (ungraded surface/4WD only) | 5 | Unfamiliar, communications plan in place | 5 |
| >8 hours driving in one day and/or multiple days of travel one way | 7 | No established roads/tracks or rough seas expected | 7 | Unfamiliar, no communications possible | 7 |
| **Day or Night Driving** | **Score** | **Weather** | **Score** | **Sleep Pattern Prior to Travel** | **Score** |
| Daylight only | 1 | Fine | 1 | 8+ hrs uninterrupted | 1 |
| Some dawn or dusk driving/boating | 3 | Stormy/wet/humid | 3 | 6-8 hrs | 3 |
| Predominantly night driving/boating | 5 | Extreme heat/wind/rain/cold | 5 | Less than 6 hours | 5 |

|  |  |
| --- | --- |
| **Total Score:** | Write total score here for all checked boxes |

**Scoring Chart:**

|  |  |  |
| --- | --- | --- |
| **Total Score** | **Risk Level** | **Approval Level Required** |
| 1-28 | Low Risk | Manager/Supervisor |
| 29-42 | Medium Risk | Head of School/Area |
| 43-56 | High Risk | Head of Faculty/Portfolio |

|  |  |
| --- | --- |
| **Section F - To be completed for all trips outside the outer metropolitan area** | |
| I agree to inform my Manager/Supervisor of any changes to this Journey Management Plan as soon as is practicable.  **Signature**: Write or insert electronic signature **Date**: Write today’s date here | Yes  No |

**Approvals:**

|  |  |  |  |
| --- | --- | --- | --- |
| **Section G - To be completed for all trips outside the outer metropolitan area** | | | |
| **Position** | **Name** | **Signature** | **Date** |
| **Manager/Supervisor** | Print name | Write or insert electronic signature | Write date here |
| **Head of School/Area** | Print name | Write or insert electronic signature | Write date here |
| **Head of Faculty/Portfolio** | Print name | Write or insert electronic signature | Write date here |