# EMERGENCY PLAN AND ONSITE PRE-SNORKEL RISK ASSESSMENT

Return to Snorkel Safety Officer on return from the field.

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| Snorkel coordinator: |  | |
| Other snorkelers: |  | |
| Surface support: |  | |
| Location: | | Date: |

**EMERGENCY PLAN** Prepared prior to leaving home base. Give details to your contact person.

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| **Emergency Phone Number:** | **000** |
| **Mobile Emergency Number:** | **112** |
| **Divers Emergency Service (DES in Australia):** | **1800 088 200** |
| Divers Emergency Service (DES international): | +61 8 8212 9242 |

***Directions to the snorkel site for Emergency Services:***

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***Nearest hospital to snorkel site and telephone number:***

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***Checklist for onsite risk assessment and briefing*: Check?**

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| Identify hazards | Weather forecast checked? Wind speed and direction? Sea state? Visibility checked? Currents? Access suitable and alternate exit point identified? Boat traffic? Dangerous marine creatures present? Thermal hazards? SharkSmart app checked? Other? |  |
| Team | Feeling fit for the snorkel? Adequately experienced for snorkel?  Buddy pairs established? |  |
| Snorkel plan | Have the team been briefed on their tasks, risks, as well as separation and emergency procedures? Hand signals established? |  |
| Safety equipment | First aid kit present? Oxygen kit set up and checked (High Risk)?  Communications system working (VHF/ mobile phone signal)?  Recall system established? Dive flag deployed ready for use? |  |
| Surface support | Surface watch prepared for immediate rescue (snorkel gear ready)?  Surface watch certified in First Aid / O2 provision if necessary? |  |

***High risk snorkelling?***

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| Depth greater than 12m? Visibility less than 4m? Wave height greater than 1m? Current moderate to strong? Outside daylight hours? Is there boat traffic? Is the site offshore or remote (more than 30 mins from emergency services) Are there more than 6 snorkelers in the water? |

If YES, **ABORT** snorkel, unless preapproved by HSO or DSO. A surface watch must be present and an oxygen kit must be onsite along with certified people to use it.

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| Incidents or injuries: |

***Post snorkel head count - All team members are back and accounted for:***

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| Coordinator Signature: | Date: |