|  |
| --- |
| A picture containing text, sign  Description automatically generated    **NAU Field Safety Plan Template** |
| Fieldwork directors are responsible for ensuring that field teams have the resources necessary to work safely in the field. This form is designed to aid in the process of assessing and mitigating the potential hazards of fieldwork. Additional instruction is available in the NAU Field Safety Manual and additional safety references are available on the [NAU Field Safety Website](https://in.nau.edu/environmental-health-and-safety/safety-programs/field-safety/).  Note: Multiple trips to the same location can be covered by a single checklist as long as any changes in hazards, dates and/or participants are documented, are on record with your on-campus departmental contact. Contact the NAU Office of Environmental Health and Safety (EHS) if you have questions or need assistance ([NAUEHS@nau.edu](mailto:NAUEHS@nau.edu)). |
| **Before you go:**   * Complete this Field Safety Plan. * Attach any activity-specific safety resources necessary to mitigate unique hazards. * Prepare any additional required documentation needed (research permits, chemical Safety Data Sheets, Standard Operating Procedures, Protocols, etc.). * Provide a copy to your designated on-campus departmental contact prior to departure for any fieldwork. * Upload a copy of your completed plan to your Employee Service Center travel case and add your on-campus departmental contact to the “watch list”. * Assemble and check safety provisions such as personal protective equipment (PPE), first aid kits, special gear, and communication devices. * Ensure all applicable required training and immunizations are current for all team members. * Ensure all emergency health care and insurance requirements have been met. * Ensure that any field team members who will be driving have completed the proper training and Driver Authorization process. * Ensure that all trip participants have completed the Acknowledgement of Risk form or other necessary waivers. |
| **Fieldwork Director/Principal Investigator/Faculty Member Name and Contact Information:** |
| **Field Team Leader Contact (Name/Phone):** |
| **On-Campus Departmental Emergency Contact (Name/Phone/Email):** |
| **Type of Field Work:** Academic Field Trip  Field Research  Observation Other |
| **Dates of Travel:** *(List multiple dates if more than one trip is planned)* |
| **Mode(s) of Transportation:** |
| **Location of Field Work:**  Country: Geographical Site: Nearest City: Distance from Site: Nearest Hospital/Distance\*: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Emergency services number/hospital contact:  \*Attach map from field site to hospital. |
| **Field Activity:** (Please include a description of the planned field activity. Attach additional information if needed.) |
| **No-Go Criteria:** *(Describe any circumstance that would require cancellation of field work (e.g., lightning, blizzard, wildfire, etc.)* |
| **Emergency Procedures:** *(Please include detailed plans for field location including evacuation and*  *emergency communication;* *Include a separate sheet if necessary)* |
| **Special Medical Requirements:** *(bee sting kits, insulin, etc.)* |
| **Communications Plan (with participants on-site as well as off-site contacts and services):** |
| **Special Equipment Required for Field Activities (attach gear list if necessary):** |
| **First Aid Training:** *(Please list any team members who are first aid trained and the type of training they have received)* |
| **Animal Studies:** A field study is defined as any study conducted on free-living wild animals that does not involve an invasive procedure or materially alter the behavior of the animal under study. To help you determine if your study fits these criteria, please answer the following questions:  1. **Does your study greatly disturb the animals under study?** Yes No  (e.g., testing predator vocalization, supplemental feeding, nest manipulation)  2. **Does your study involve an invasive procedure?** Yes No  (e.g., blood sampling, tagging)  3. **Does your study** **cause potential harm/injury to the animal?** Yes No  (e.g., net and trap capture, bagging)  If you answered **YES to any** of these questions, your study involves invasive procedures or materially alters the behavior of the animal under study. Please fill out the full IACUC protocol application form: <https://nau.edu/nau-research/research-safety-and-compliance/animal-care/>  If you answered **NO to all three** of these questions and your study will only involve observation of free ranging animals, then an IACUC protocol is not required. |

|  |  |
| --- | --- |
| **Risk Assessment**: Please check identified risks associated with the activity or the physical environment and the appropriate safety measures to be taken to reduce the risks (personal protective equipment, training, SOPs, etc.); Include a separate sheet if necessary. Attach Safety Data Sheets (SDSs) and training documentation for any chemicals that will be used. | |
| **Identified Risk** | **Specific Safety Measures to Mitigate Risk** |
| Altitude-related Illness |  |
| Animal Hazards |  |
| Backcountry Hazards |  |
| Biological Hazards |  |
| Chemical Hazards (attach Safety Data Sheets to your Field Safety Plan) |  |
| Climbing/Rappelling |  |
| Communication Challenges in Remote Areas |  |
| Driving Hazards |  |
| Excavation or Trench Hazards |  |
| Fire Hazards |  |
| Infectious Agents and Diseases (including human derived materials) |  |
| International Travel Advisories |  |
| Machinery/Equipment Hazards |  |
| Physical Exertion |  |
| Plant Hazards |  |
| Open Water/River Crossing Hazards |  |
| Orienteering Challenges |  |
| Regional Hazards (hunting season, civil unrest, etc.) |  |
| Respiratory Hazards (dust, allergens, biologicals, chemicals, etc.) |  |
| Travel to Remote Areas |  |
| Weather-Related Hazards |  |
| Working from Heights |  |
| Other: List *below (Visit the* [*NAU Field Safety Website*](https://in.nau.edu/environmental-health-and-safety/safety-programs/field-safety/) *for additional resources)* |  |
|  |  |
|  |  |

|  |
| --- |
| **Field Team Membership** (Please list the names of all field participants, and the Field Team Leader.) *Include a separate sheet if necessary.* |
| **Name/Cell Phone Number (if applicable on site)** |
| 1 |
| 2 |
| 3 |
| 4 |
| 5 |
| 6 |
| 7 |
| 8 |
| 9 |
| 10 |
| 11 |
| 12 |
| 13 |
| 14 |
| 15 |
| 16 |
| 17 |
| 18 |
| 19 |
| 20 |
| 21 |
| 22 |
| 23 |
| 24 |
| 25 |