

Unit : Plymouth & Cornwall Wing ATC  
Risk Assessment Number: TT0905

Activity / Exercise : Travelling by Motor Vehicle  
GENERIC RA: **YES** (delete as appropriate)

Relevant Publications / Pamphlets / Procedures	Assessor		Related RA's (e.g. Manual Handling)
	Name: Flt Lt K Hemsil		
	Date: 29-12-08		
	Review Date 29-12-09		

The following steps relate to the Risk Assessment Process

Ser	Activity	Hazards identified	Existing controls	Residual Risk Acceptable Y/N	Additional controls	Residual Risk Acceptable Y/N
(a)	(b)	(c)	(d)	(e)	(f)	(g)
1	Travelling by Motor Vehicle	Inexperienced driver	Suitably qualified & experienced drivers only. Drivers of white fleet vehicles are to hold RAF FMT600 driving licences	Yes		
2	Travelling by Motor Vehicle	Poor maintenance, vehicle equipment failure	The vehicle must be well maintained, insured with a valid MOT Regular servicing to be carried out	No	Daily maintenance regimes to be carried out by competent person.	Yes
3	Travelling by Motor Vehicle	Road Traffic Accident or other impact injury.	All seats must be fitted with seat belts. Mobile phone to be carried in to communicate with emergency services.	No	All seat belt to be checked for correct operation before journey commences	Yes
4	Travelling by	Driver affected	Drivers are not permitted to	Yes		

	Motor Vehicle	by Alcohol, drugs or medication.	drive under the influence of Alcohol. This applies to back up and emergency drivers. Drivers and back up drivers are advised not to drive if taking medication that could affect their ability to control the vehicle.			
5	Travelling by Motor Vehicle	Slips, trips & falls	Aisles must be kept clear at all times	No	Luggage to be stowed correctly at all times	Yes
6	Travelling by Motor Vehicle	Falling objects	Care to be taken when storing objects at high level	No	No heavy objects to be stored at high level	Yes
7	Travelling by Motor Vehicle	Driver Fatigue.	Suitable rest breaks to be planned.	No	Additional breaks are to be taken if the need arises Drivers hours to be booked on form and monitored.	Yes
8	Travelling by Motor Vehicle	Excess speed	Speed limits are to be the maximum permissible speed	No	Local conditions are to be considered DO NOT EXCEED STATUTORY local SPEED LIMITS	Yes
9	Travelling by Motor Vehicle	Fire	No smoking to be allowed on any vehicle. Fire extinguisher carried. Flammable liquids (i.e. camping fuel) to be stored in secure approved containers. Luggage is secured correctly. Passengers briefed on emergency	Yes		

			procedures.			
10	Travelling by Motor Vehicle	Spare fuel (if really required)	Not to be carried in same space occupied by driver or passengers	No	Suitable containers to be used and regular monitoring carried out Only to be taken if in a remote area covering excessive distances.	Yes
11	Travelling by Motor Vehicle	First aid injuries	First aid kit to be readily available in each vehicle	No	All injuries to be treated by suitably qualified First Aider & recorded in an accident book	Yes
12	Travelling by Motor Vehicle	Towing	No cadets to be in vehicle being towed	No	Maximum towing speeds are not to be exceeded	Yes
13	Travelling by Motor Vehicle	Fire	Extinguishers to be readily available	No	Exit routes to be clearly marked & unlocked	Yes
14	Travelling by Motor Vehicle	Driver distraction	Drivers mobile phone to be switched off or handed to another person during the journey Passengers to be briefed on behaviour.	No	No nuisance noise from Walkman/radios. Nothing is to be thrown about the vehicle.	Yes
15	Travelling by Motor Vehicle	Pedestrians struck by moving vehicle whilst waiting at roadside during vehicle breakdown (especially motorway hard	Passengers to be supervised by an authorised and nominated and competent person. Passengers advised to stay in vehicle at roadside or removed to safer area a suitable distance from vehicle during breakdown or	Yes		

		shoulder)	other unplanned stop.			
16	Travelling by Motor Vehicle	Pedestrians struck by moving vehicle whilst reversing	Passengers and pedestrians supervised and kept clear of minibus whilst it is manoeuvring and in particular reversing.	Yes		

Details of Person responsible for carrying out this risk assessment / Review

Controls	Name (print)	Post	Date	Signature
Existing & Additional controls agreed – Sqn Cdr, Wing, Region				
Additional Controls Implemented – Activity Commander	K Hemsil	TT Co ord		