

CAPF 160 - DELIBERATE RISK ASSESSMENT WORKSHEET

| 1. ACTIVITY July Monthly Safety Brief | | | 2. DATE (DD/MM/YYYY) 01/07/2022 | | |
|--|--|---------------------------------------|--|--|---|
| 3. PREPARED BY | | | | | |
| a. Name (Last, First, Middle Initial) Podgurski, Gary D | | b. Rank MSgt | c. Duty Title/Position Wing Safety NCO | | |
| d. Unit Arkansas Wing | e. Email gpodgurski@cap.gov | | f. Telephone (479) 285-1482 | | |
| g. Signature of Preparer //Signed// | | | | | |
| Five steps of Risk Management: (1) Identify the hazards (2) Assess the Risks (3) Develop Controls & Make Decisions (4) Implement controls (5) Supervise and evaluate (Step numbers do not equate to numbered items on form) | | | | | |
| 4. SUB- ACTIVITY or SPECIFIC TASK | 5. HAZARD | 6. INITIAL RISK LEVEL | 7. RISK CONTROL | 8. HOW TO IMPLEMENT/ WHO WILL IMPLEMENT | 9. RESIDUAL RISK LEVEL |
| Note: Each sub-activity or task will probably have multiple hazards/risks associated with it. Each one should be assessed. | Consider Hazards from each of the "5-M" categories in CAPP 163: - Member - Medium - Machine - Mission/Activity - Management | Use Risk Assessment Matrix on page 3. | Describe the actual control being used to address the specific risk. | Describe how the risk control will be implemented and monitored, and who is responsible. | Use Risk Assessment Matrix on page 3 of form |
| Email Auto Reply | Member | L | Educate Member COMSEC | How: Monthly Safety Brief Who: MSgt Podgurski | L |
| 360 Back up Vision | Member | H | Educate Member | How: Monthly Safety Brief Who: MSgt Podgurski | L |
| Fireworks | Member | H | Educate Member Plan | How: Monthly Safety Brief Who: MSgt Podgurski | M |
| ADDITIONAL SPACES FOR ITEMS 4 THROUGH 9 PROVIDED ON PAGE 2 | | | | | |
| 10. OVERALL RESIDUAL RISK LEVEL - (The highest residual risk level in Column 9, with all controls implemented): | | | | | |
| <input type="checkbox"/> EXTREMELY HIGH | | <input type="checkbox"/> HIGH | | <input checked="" type="checkbox"/> MEDIUM | <input type="checkbox"/> LOW |
| NOTE: ALL RESIDUAL RISKS ASSESSED AS "H" OR "EH" MUST BE APPROVED BY CAP/CC | | | | | |
| 11. OVERALL SUPERVISION PLAN AND RECOMMENDED COURSE OF ACTION: | | | | | |
| Unit Commanders and Unit Safety officers will disseminate this information as far and wide as possible. Information should be posted on Social Media as well as squadron and wing websites. After acknowledgment from members, notation should be made in SIRS | | | | | |
| 12. APPROVAL OR DISAPPROVAL OF MISSION OR ACTIVITY APPROVE <input checked="" type="checkbox"/> DISAPPROVE <input type="checkbox"/> | | | | | |
| a. Name (Last, First, Middle Initial) Podgurski, Gary D | | b. Rank MSgt | c. Duty Title/Position Wing Safety NCO | | d. Signature of Approval Authority //Signed// |

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(Use CAPF 160HL if additional space is needed)

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|-----------------------------------|-----------------|-----------------------|-----------------|--|------------------------|
| CO2 Detectors | Member Property | H | Educate Member | How: Monthly Safety Brief | L |
| | | | | Who: MSgt Podgurski | |
| Hydrate!! | Member Mission | H | Educate Member | How: Monthly Safety Brief | L |
| | | | | Who: MSgt Podgurski | |
| Low Level Flying | Member Mission | EH | Educate Member | How: Monthly Safety Brief | M |
| | | | | Who: MSgt Podgurski | |
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| | | | | Who: | |
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