TRIP PLAN

Canada / US, field work

SUPERVISOR NAME: [   ]

DATE OF TRIP PLAN COMPLETION: [   ]

TRIP NAME: [   ]

DATES OF TRIP/FIELD WORK: [   ] to [   ]

Departure Date   Return Date

This TRIP PLAN is required for all off-campus travel within Canada or to the US that involves field work activities. This TRIP PLAN can be completed for individual travellers (faculty/staff) or groups of travellers as appropriate. Individual students who travel internationally should refer to Policy SC12 and are required to complete the Student International Travel requirements through GoGlobal.

This TRIP PLAN and the associated FIELD WORK SAFETY PLAN (as required) are in place to meet the requirements of the BC Workers' Compensation Act (RSBC 1996). These documents must be completed PRIOR to departure and updated whenever there is a change in the activities, location or environment.

For domestic travel, all students participating in the trip should be asked to complete the UBC Release of Liability, Waiver of Claims, Assumption of Risks.

Please access CANVAS – SNBX 500 for a full description of instructions and resources to support UBC trip and field work planning.

Upon completion of this TRIP PLAN, please save for your records and record your trip *using the 'Document your Trip Plan' tool*.

1. Trip Details

Trip Name:	
Principal Investigator (if applicable):	
Travel Supervisor:	
Department:	
Contact Info:	**Cell:** **Home:** **Email:** **Other:**
Destination:	
Departure Date:	
Return Date:	
Trip Description:	

2. Participants

Name	Role	Email	Emergency Form Completed	Informed Consent (Students, within Canada)
			☐	☐
			☐	☐
			☐	☐
			☐	☐
			☐	☐
			☐	☐

3. Risk Assessment of Travel Destination(s)   ☐ Section does not apply

List any known or foreseeable risks associated with the travel destination and how you will control these risks.

Destination	Risk	Control Measures / Notes

4. Accommodations & Meals   ☐ **Section does not apply**

	Dates	Type of Lodging*	Address / Location Description	Closest City**	Contact Information	Meals***
1.						
2.						
3.						
4.						
5.						

- CG (Campground); WT (Wilderness Tenting); TR (Trailers); CA (Cabin); HM (Hotel/Motel); O (Other)
**-Population >100,000
***- SP (Self Prepared); C (Catered); R (Restaurant)

5. Transportation   ☐ **Section does not apply**

Include each means of transportation to be used during trip. Any transportation that requires additional training/experience should be captured within section 7 - Field Work Safety (i.e. required training, special licencing, insurance, personal protective equipment).

Type of Transport (road, atv/utv, air, boat)	Period of Use	Details (rental car/vehicle, air carrier)	Operator(s) – if a member of the travel group

6. First Aid

First aid attendant and equipment needs should be completed as outlined by WorkSafeBC. Please see here for Occupational First Aid equivalencies.

Work Hazard Rating	Travel time to hospital	# of workers/ participants		Required OFA level	Required Equipment
	mins				

First Aid Attendant Name	OFA Level	OFA Expiry

7. Field Work Safety: Risk Assessment & Mitigation

Supervisors have a general duty to ensure the health and safety of those under their supervision. A risk assessment provides an opportunity to consider all know and foreseeable hazards and to establish controls in order to minimize the risk.

It is preferred to utilize UBC's Risk Assessment & Safety Work Procedure to establish controls for the specific risks that apply the work being performed in the field. Additional information relating to specific field safety topics can be located from the UBC Field Safety information repository. A summary of your specific risk assessment and controls should be included in the table below:

Task	Hazard	Control Measures
1.		
2.		
3.		
4.		
5.		
6.		

8. Accommodations & Meals   ☐ Section does not apply

To be completed where travel duration will exceeds 24 hours.

Regular check-in should occur at intervals between 24 and 72 hours with someone who is not travelling. If check-in does not occur, the contact person shall attempt contact with the travel supervisor. If a check-in is not completed, the emergency response plan escalation protocol (outlined below), shall be implemented following the identified grace period. The contact person identified in this section should be provided with a copy of the Trip Plan prior to departure.

Contact person	Contact Information (tel. #)	Alternate Contact Information	Frequency of Check-In

> **NOTE:** *Where travellers will be split up during the trip (for field work or other activities), it is recommended that a check-in between trip participants occurs at regular intervals between 1 hour and 24 hours (based upon the hazards of the destination and of the field work being performed).*

9. Emergency Response

The Emergency Response Plan is intended to provide an escalation protocol in cases where travellers miss their check-in, or in case of an emergency while travelling.

a) *Emergency Response Plan*

   All travellers should be informed of the steps to take in case of an emergency. These steps should be informed by the risks associated with the travel locations (Part 3) and may differ throughout the trip. At minimum, travellers should be advised how to summon help and where they should go in case of an emergency. Also, it is imperative that all travellers are aware of the 'UBC – home contact' who is aware of the trip itinerary and available to support travellers in case of an emergency.

   Note that International SOS is also available to support UBC travellers in case of emergency or when the UBC Home Contact is not available (for travel to USA).

b) *Trip Contact Information*

Travel Supervisor Contact Information		UBC Home Contact* Information
Cell Phone		Name
Satellite Phone		Daytime Contact #
Local / Other Contact		Afterhours Contact #

*- a non-travelling UBC employee who will retain a copy of the trip itinerary/trip plan and will be available to coordinate communication in case of an emergency

c) *Escalation Protocol*

   The check-in contact (from Section 8) is expected to follow the escalation protocol in the event that the check-in does not occur and the grace period passes.

   Grace period is: _____hour(s)

Step	When to call	Who to call
1	Following expiry of grace period	Alternate travellers
2	If no answer in step 1	Accommodation contact, if possible (Section 4)
3	If no answer in step 2	UBC Home Contact (Section 9b)
4	If no answer in step 3	UBC Security

10. Training & Immunizations   ☐ **Section does not apply**

To be completed if training is a control listed in section 7 or if vaccinations are required (section 3) for the destination and/or work being performed.

Any required training and/or vaccinations should be listed in the table below, with dates of completion.

Participant's Name	Training Received	Immunizations Received

11. Approvals   ☐ **Section does not apply**

To be completed by the Trip Supervisor.

I acknowledge that I have reviewed the information contained in this document for completeness and accuracy and I will ensure that travellers are aware of any known or foreseeable hazards and emergency response expectations while travelling.

Trip Supervisor	Signature	Date (DD/MM/YYYY)
		Click or tap to enter a date.

To be completed by the Department Head or Designate.

I acknowledge that I have reviewed this Trip Plan and approve the travel.

Program Head Name	Signature	Date (DD/MM/YYYY)
		Click or tap to enter a date.

To be completed by each traveller.

By signing below, the following travellers confirm that they have been provided with a copy of this Trip Plan and any additional associated procedures/protocols.

Participant's Name	Signature	Date (DD/MM/YYYY)
		Click or tap to enter a date.
		Click or tap to enter a date.
		Click or tap to enter a date.
		Click or tap to enter a date.
		Click or tap to enter a date.
		Click or tap to enter a date.

Upon completion of all approvals, please upload your Trip Plan using the 'Document your Trip Plan' tool.