



St. Thomas University

POLICY 2001:	Student Travel and Fieldwork Safety
Effective Date:	December 5, 2014
Revised Date:	
Review Date:	September 2019
Approving Body:	Vice-President (Finance & Administration)
Authority:	
Contact:	Director, Facilities Management
Applies to:	All University-sanctioned student fieldwork/fieldtrips

1.0 Reason for Policy

This policy is designed to ensure that persons engaged in student fieldwork/fieldtrips on behalf of the University incorporate appropriate preventative measures to: reduce risks to themselves, their colleagues and the University; to aid in prevention of accidents; and to maintain emergency plans to activate in the event that accidents do occur.

1.0.1. Purpose:

- a) The work of St. Thomas University may take place in settings not normally considered to be part of the University. The terms “fieldwork”/“fieldtrips” refers to the activities conducted for the purpose of research, study, or teaching undertaken by students, with faculty involvement, at any “**off-campus**” location where the standard operating procedures of the University may not apply. Examples of such activities include: Student work placements or practicums, research by students, study abroad, etc.

1.0.2. Scope:

- a) This policy applies to all members of the University community (faculty, staff and students), either as a participant or as a responsible party.
- b) The key persons involved in ensuring the safety of those engaged in fieldwork are the Deans, Designated Faculty Member(s), Team Leaders and Team Members.
- c) This policy and its related procedures are not intended to limit or amend provisions of any collective agreement, or any contractual agreement entered into by University faculty members, staff or student groups. The policy is designed to complement related University policies.
- d) This policy is not intended to include negligible risk activities that can reasonably be considered to fall within the scope of students’ everyday lives.

Example: visiting a local establishment such as an art gallery, attending a concert, etc. However, faculty members will not transport students in privately owned vehicles unless exceptional circumstances warrant it and is approved by the Dean.

2.0 Policy Statement

- a) Deans and Designated Faculty Members are responsible for ensuring that appropriate fieldwork and associated travel safety procedures and processes are implemented prior to the commencement of any fieldwork. This will normally be done by taking into consideration the nature of hazards arising from activities, agents, equipment or areas where the fieldwork is to be conducted. Special attention is required for activities or workplaces deemed “high risk”.
- b) Deans and Designated Faculty Members are responsible for ensuring that these procedures and processes are communicated and enforced, and it is the responsibility of the fieldworkers to comply.
- c) The Vice-President (Finance and Administration) will provide guidance in the development of procedures where they do not exist.

2.0.1. Responsibilities

a) **Deans:**

The Deans are responsible for:

- I. Communicating the Policy and associated procedures to the Designated Faculty Members and Team Leaders;
- II. Receiving for approval the “Travel and Field Work Safety Plans” (Appendix “A” attached). **Note:** For the Study Abroad Program the Dean of Social Sciences will authorize travel plans in his/her role of Chair of the International Education Committee;
- III. Receiving and storing the completed (signed) *Release, Waiver and Assumption of Risk Agreement Forms* (Appendix C) from the Designated Faculty Member or Team Leader. **Note:** *Release, Waiver and Assumption of Risk Agreement Forms* (when used) shall accompany the Travel and Field Work Safety Plan;
- IV. Returning a copy of the authorized Travel and Field Work Safety Plans to the Designated Faculty Member;
- V. Storing a Travel and Field Work Safety Plan for each applicable fieldwork project.

b) **Designated Faculty Member:**

Responsibility for ensuring fieldwork safety rests primarily with the Designated Faculty Member, or the person supervising or guiding the specific project at the location involved. This person is expected to exercise good judgment, and to take reasonable steps to protect the health and safety of participating team members.

The Designated Faculty Member is responsible for:

- I. Approving the composition of the fieldwork team;
- II. Ensuring that a Travel and Field Work Safety Plan (Appendix “A” attached) is completed and approved prior to departure. A form to facilitate obtaining

medical and emergency contact information is included in Appendix D. **Note:** When used, *Release, Waiver and Assumption of Risk Agreement Forms* (Appendix C) shall accompany the Travel and Field Work Safety Plan when they are transmitted to the Dean(s) for approval;

- III. Making arrangements for appropriate transportation to and from the location of the fieldwork, where applicable;
- IV. Making arrangements for hotel accommodations;
- V. Considering the need to accommodate team members with disabilities, including any financial implications (in consultation with Accessibility Services where appropriate);
- VI. Determining what safety equipment is appropriate, and ensuring that each team member is instructed in the proper use of the equipment (examples include hard hats, safety boots etc.);
- VII. Ensuring each team member is made aware of the specific requirements that must be met for participating in the fieldwork prior to departure (such as visas, immunizations, health insurance requirements, etc.);
- VIII. Conducting risk assessments and identifying appropriate safety procedures (examples: Locally: Checking road and work site conditions. Internationally: Checking with Facilities Management for bulletins on travel conditions and current events. That information is available at the following website: <http://travel.gc.ca/travelling/advisories>). If deemed necessary, ensuring that there are first aid supplies and a trained team member to use them if an emergency should arise;
- IX. Informing all international travellers to register with DFATD. <http://travel.gc.ca/travelling/registration>;
- X. Recognizing the right and responsibility of an individual to exercise personal judgment in acting and avoiding harm in situations of apparent danger;
- XI. Requiring every team member to attend any relevant training courses on field safety;
- XII. Ensuring that each team member receives appropriate site-specific training, including information on the known risks and physical hazards of the area in which the fieldwork is to be carried out;
- XIII. Establishing a chain of leadership that is understood by all participants and documenting this chain of responsibility;
- XIV. Maintaining written documentation of all the above steps and any other required safety procedures (this documentation can be part of the Travel and Field Work Safety Plan). It shall be filed with the office of the Dean prior to departure (for the *Study Abroad Program* a copy will be filed with the Chair of the International Education Committee).

c) **Team Leader:**

The fieldwork Team Leader may be the Designated Faculty Member or, in the absence of the Designated Faculty Member, may be another team member designated by the Designated Faculty Member.

The Team Leader is responsible for:

- I. Ensuring implementation of the controls and safety procedures established by the Designated Faculty Member;

- II. Ensuring that the team members use appropriate safety equipment and follow appropriate safety procedures and medical precautions;
- III. Conducting on-going risk assessments during the fieldwork and reporting significant new hazards to the Designated Faculty Member, and/or Dean;
- IV. Addressing or resolving any safety concerns that arise in the field;
- V. Maintaining regular contact with the Designated Faculty Member wherever and whenever possible;
- VI. Informing the Designated Faculty Member of all substantive safety incidents that occur in the field in a timely fashion;
- VII. Ensuring there is ongoing communications with the team members (Ex.: phone or wireless contact if the team leader is separated from team members).

d) **Team member:**

Each member of a fieldwork team plays an important role in maintaining his or her own safety during fieldwork. A team member's duties include:

- I. Understanding the requirements of the fieldwork safety procedures for the project;
- II. Familiarizing him/herself with the risks of their particular field project. This may include signing a document which acknowledges the risks and/or playing an integral part in documenting preventative measures in the Travel and Field Work Safety Plan;
- III. Using the appropriate protective equipment provided by the Designated Faculty Member;
- IV. Registering with DFATD Canadians Abroad if travelling abroad. <http://travel.gc.ca/travelling/registration>;
- V. Working safely and in a manner to prevent harm to him/herself or to others;
- VI. Where required by the Team Leader and due to the nature of the activity, providing evidence of a satisfactory state of health and immunization status;
- VII. Providing evidence of adequate health insurance coverage;
- VIII. Reporting any identified hazards to the Team Leader in a timely fashion;
- IX. Wherever possible travelling in groups of two or more;
- X. Monitoring communications from the team leader.

2.0.2. Procedures:

a) **Travel:**

- I. All team travel will be arranged by the Designated Faculty Member. Faculty members will not transport students in privately owned vehicles unless exceptional circumstances warrant it and is approved by the Dean. Privately owned vehicles used on approved University travel are to be properly insured, registered, and inspected;
- II. Vehicles equipped with winter tires will be used for travel during the period extending from November 1st to April 15th. (Note: for buses, "winter tires" mean a combination of tires specifically designed for winter driving conditions.);
- III. All Team members must travel as a part of the team contingent and must be accompanied by a Designated Faculty Member unless otherwise approved (see below);

- IV. Team members can request permission to travel separately from the team. This request must be submitted in writing/email to the Designated Faculty Member a minimum of 48 hours prior to departure. If approved by the Designated Faculty Member(s), request to be forwarded to the Dean for final approval;
 - V. Designated Faculty Member(s) and Team Leaders must submit travel roster to the Dean 48 hours in advance of the field trip and ensure the Dean has appropriate emergency contact info. (see Appendix "A", attached);
 - VI. In the event of an accident, the individuals identified as "emergency contacts" may be informed by the Dean as appropriate;
 - VII. Travel by passenger vans or motor coaches (fifteen passenger vans will not be used) may only take place on approval from the Dean or their designate. Vans or vehicles can never have more passengers than available seat belts. Alternative transportation will be made available when weather conditions (ex.: snow, freezing rain) dictates. Only drivers with appropriate licenses for the vehicle being driven and approved by the Dean can drive (drivers must have a current photocopy of their license on file with the Dean);
 - VIII. When departing from St. Thomas University in poor weather conditions or if a weather storm warning/watch is in place, the Dean may decide not to allow travel after reviewing most current forecasts and in consultation with some or all of the following: driver, bus company and Designated Faculty Member;
 - IX. When on the road in poor weather conditions the motor coach driver will decide if it is safe to proceed. If a decision is made to not proceed, the Designated Faculty Member will inform the Dean of that decision and arrangements will be made for overnight accommodations at the nearest possible appropriate hotel/motel. The Designated Faculty Member will arrange payment for accommodations;
 - X. All parties traveling must carry proper identification and Provincial Health Card. If teams are traveling internationally, Team Members are responsible for procuring and carrying their passports (and/or other appropriate documentation – i.e.: Nexus card) and apply for international travel VISA where necessary;
 - XI. All Team Members must carry appropriate medical coverage for travel outside of Canada. If necessary Blue Cross coverage can be arranged and purchased by the Department and charged to the Department's budget if within the existing budget;
 - XII. No alcoholic beverages or tobacco are permitted in the coach, bus, van or car;
 - XIII. Teams should be reminded by Designated Faculty Member(s) and Team Leaders that the Student Code of Conduct applies during student fieldwork activities and related-travel.
- b) Accommodations:**
- I. Team accommodations will be arranged by the Designated Faculty Member;
 - II. Once arrangements have been made/identified the Deans will ensure that a requisition is prepared and a purchase order issued by the Facilities Management Department.

c) Expenses:

Current information on allowable travel expenses and purchasing may be found on STU's Financial Services webpage:

<http://w3.stu.ca/stu/administrative/financial/policies/documents/ExpenditureTravelPolicyMarch20140318.pdf>

2.0.3. Miscellaneous

a) Liability Waivers/Permission Forms:

Certain activities such as studying abroad may require Liability Waivers. Minors (under 19 years of age) will need parental permission to participate (see appendix "C").

b) Reporting Accidents/Incidents:

Report all serious incidents/accidents to the appropriate Dean as soon as possible, and all other incidents/accidents within 48 hours. If there is an incident which you believe could lead to a liability claim against the University, please provide a written description of the incident and, the names and phone numbers of any witnesses (see Appendix "B" Attached).

The Dean(s) will advise the Director of Facilities Management and the Director of Communications of all incident/accident reports.

2.0.4. Contacts

- a) Dean of Humanities
- b) Dean of Social Sciences
- c) Vice-President (Academic and Research)
- d) Director (Facilities Management)

3.0 Accountability

The Vice-President (Finance & Administration) will be responsible for the general communication, administration and interpretation of this policy.

4.0 Related Documents

- Appendix "A" Travel and Field Work Safety Plan
- Appendix "B" Accident/Incident Report Form
- Appendix "C" Release/Waiver and Assumption of Risk Form ("Agreement")
- Appendix "D" Medical and Emergency Contact Information Form

Appendix A

Faculty Member: _____
 Dept.: _____
 Course Name & No.: _____
 Date: _____

Travel and Field Work Safety Plan

For Academic Field Trips or Course Related *Off Campus* Activity

Sanctioned individuals/groups planning to work or conduct fieldwork off Campus must complete, and submit, this form to the Dean for approval no less than 48 hours before the event. A copy of the completed form is to be left with the Dean.

Location/Destination Information (attach map if necessary)

Destination		Proposed Route (From Campus to Destination)	
Departure From Campus: Date/Time		Estimated Return to Campus: Date/Time	
Mode of Travel		Vehicle Identification (Make, Model ,License #)	

Emergency Contact Information

Team Leader:

Team Leader's Name	ID #	Phone Number(s)
Known Health/Medical Conditions	Emergency Contact Name	Emergency Contact Number

Field Team Members (Faculty, Staff and Students):

Field Team Member	ID #	Proof of Health Insurance Confirmed/Provided	Known Health Conditions	Emergency Contact Name	Emergency Contact Number

Cont'd:

Field Team Members (Faculty, Staff and Students):

Field Team Member	ID #	Proof of Health Insurance Confirmed/Provided	Known Health Conditions	Emergency Contact Name	Emergency Contact Number

Use additional forms if needed.

Additional Details (description of proposed work, risks considered, equipment required etc.):

Authorization:

Dean (Print):	Signature:
Date:	Signature:

Appendix B

Faculty Member: _____
Dept.: _____
Course Name & No.: _____
Date: _____

Travel and Field Work Safety Policy Accident/Incident Report

NAME OF INSTITUTION	
NAME AND TITLE & DEPT. OF INDIVIDUAL COMPLETING THIS REPORT (BLOCK LETTERS, PLEASE)	
ACCIDENT LOCATION INFORMATION DATE & TIME OF ACCIDENT: D__ M__ Y __ TIME: AM. PM.	
FACILITY:	ACTIVITY:
LOCATION OF ACCIDENT:	OUTDOORS:
BUILDING: ROOM #:	
DESCRIBE EXACT SITE OF ACCIDENT INCLUDING ANY CONTRIBUTING PHYSICAL SITE CONDITIONS:	
IDENTITY OF ACCIDENT VICTIM NAME F__ M__ AGE__	
ADDRESS PHONE (HOME & BUSINESS)	
HOME ADDRESS (IF OTHER THAN ABOVE)	
STUDENT AT INSTITUTION STUDENT # _____ EMPLOYEE OF INSTITUTION _____ VISITOR _____	
INJURY DESCRIPTION	
DESCRIBE CONDITION OR INJURY:	
TREATMENT RECEIVED? BY WHOM?	
PROPERTY DAMAGE	
OWNER:	ADDRESS:
PHONE- BUSINESS:	HOME:
DESCRIBE PROPERTY:	
DESCRIBE DAMAGE:	
DESCRIPTION OF ACCIDENT	
DESCRIBE EXACTLY WHAT HAPPENED - <i>IN VICTIM'S OWN WORDS IF POSSIBLE</i> - (ATTACH SEPARATE REPORT WHEN REQUIRED)	

MEDICAL ASSISTANCE OFFERED? ACCEPTED? IF SO, SPECIFY TYPE:

WITNESS (Identification is Vital!)

NAMES: ADDRESSES: PHONE NUMBERS:

REACTION/RESPONSE HOW

HOW WAS THE ACCIDENT REPORTED? BY WHOM?

TIME REPORT RECEIVED? WHO RESPONDED?

RESPONSE TIME:

MISCELLANEOUS (Relevant Information not included above)

REPORTED TO INSURANCE ADJUSTER (Identify Adjuster)

PREPARATION

PREPARED BY:

TELEPHONE #:

DATE: SIGNATURE:

Additional Details:

Appendix C

Faculty Member: _____

Dept.: _____

Course Name & No.: _____

Date: _____

Travel and Field Work Safety Policy Release, Waiver and Assumption of Risk Agreement Form (“Agreement”)

ATTENTION: BY SIGNING THIS LEGAL DOCUMENT, YOU GIVE UP CERTAIN LEGAL RIGHTS, INCLUDING THE RIGHT TO SUE. PLEASE READ CAREFULLY.

In consideration of St. Thomas University (“University”) making arrangements for me to study/receive training at _____ commencing on _____,

I freely and voluntarily agree as follows:

Assumption of Risks: I understand that the Program will take me away from the University campus. During this period, I understand that I may be exposed to risks and hazards to my person and possessions. I freely and voluntarily assume all risks and hazards relating to participation in the Program, including but not limited to:

- death, injury, illness or loss from accidents of any nature whatsoever and/or acts of negligence;
- death, injury, illness or loss as a result of a crime or criminal acts by third parties, terrorism, war, civil unrest, riot, detention by a foreign government, arrest, other acts of any government or authority, medical quarantine or any other disturbances or causes;
- death, injury, illness or loss as a result of any natural disaster or event or extreme weather conditions or events; and
- theft or loss of personal property during the Program or any Program related travel.

I acknowledge that the above list is not inclusive of all possible risks and hazards associated with participation in the Program and that the above list in no way limits the extent of this Agreement. I acknowledge that I had option(s) not to participate in the traveling or fieldwork, but selected to do so freely and voluntarily.

Assumption of Responsibility: I understand that the University makes no statement or warranty as to the safety of the Program. I acknowledge that I have been advised by the University of the potential Risks and hazards of participating in the Program, as well as the need to act in a responsible manner at all times. I agree to inform myself about the potential risks, hazards and dangers of the areas I am travelling to and precautions which should be taken. I agree that my safety is primarily dependent upon my taking proper care of myself and avoiding any activity or behaviour that would cause harm to me or others. I agree to observe the rules and practices which may be posted or advised by the University and of each of the destinations to which I travel.

I agree to ensure that I have adequate medical, personal health, dental and accident insurance coverage, as well as protection of my personal possessions, during my participation in the Program.

Liability Waiver: I, my heirs, executors, administrators, successors and assigns do hereby release and hold harmless the University and all of its affiliated, related and/or participating corporations, companies, entities and organizations and their agents, successors, servants, trustees, employees, officers, directors, volunteers, students, assigns and independent contractors from any and all liability for any loss, damage, injury or expense that I or my next of kin may suffer as a result of my participation in this Program, including, but not limited to, accidents, crime or criminal acts by third parties, terrorism, war, civil unrest, riot, detention by a foreign government, arrest, other acts of any government or authority, medical quarantine, any other disturbances or causes, natural disasters or events, extreme weather conditions, transportation, accommodations, scheduling and government restrictions or regulations. I understand that this waiver cannot be modified or interpreted except in writing by the University and that no oral modification or interpretation shall be valid.

I RECOGNIZE THAT I HAVE THE OPPORTUNITY TO SEEK INDEPENDENT LEGAL ADVICE PRIOR TO SIGNING THIS AGREEMENT. I HAVE CAREFULLY READ AND FULLY UNDERSTAND THIS AGREEMENT AND I FREELY AND VOLUNTARILY EXECUTE THE SAME.

Please write YES or NO in the box next to the question and initial that you have read each question.

1. Do you understand the purpose of this waiver? _____; Initials _____
2. This event has inherent risks. Do you understand these risks? _____; Initials _____
3. Are you willing to assume these risks? _____; Initials _____

Student Name: _____

Student Number: _____

Student Signature: _____

Witness Signature: _____

For Students under the age of 19 (Minors), parental signature is required.

Parental Signature (if applicable): _____

Appendix D: Medical and Emergency Contact Information Form

Participant Information	
Full Name:	Student ID:
Information you wish to disclose regarding medical condition(s), medications, allergies, etc.:	
Emergency Contact #1 <i>(should have knowledge of any medical condition(s), medications, allergies, etc...)</i>	
Full Name:	Relationship:
Phone Number:	Alternate Phone Number:
Address:	
Emergency Contact #2 <i>(should have knowledge of any medical condition(s), medications, allergies etc...)</i>	
Full Name:	Relationship:
Phone Number:	Alternate Phone Number:
Address:	
<p>I consent to the disclosure of the information in this document as necessary in the event of an emergency. I acknowledge that I have informed my Emergency Contact(s) of this designation.</p>	
Signature: _____	Date: _____

St. Thomas University collects and protects personal information under the authority of the New Brunswick *Right to Information and Protection of Privacy Act* for the purposes of operating the programs and services of the University. The personal information collected on this form will be used in the event of an emergency and to contact an individual traveller's designated emergency contact.

The original (and any copies) of this form will be kept in a secure location.