

CPA DIVE PLAN & RISK ASSESSMENT FORM

This form is for use prior to all diving activities by members of Caversham Park Aquanauts (CPA) as club dives. There is an online version available to all CPA members on the SmartGroups website.

This form is designed to make your dive planning and logging effective and complete - while ensuring that all diving activities within CPA meet the requirements and standards of the SAA.

Dives carried out as a part of a holiday should be discussed with the DO separately.

DO USE ONLY:

Dive Plan Number:

Date:

Please note, the DO must give his express permission to dive, based on the information that you provide in this form.

Diving without the express permission of the DO will result in your dive being conducted outside the remit of the SAA and Caversham Park Aquanauts.

DIVER INFORMATION

Please complete the following details for every diver in your group (add more divers using additional copies of this form if necessary):

Diver Name

Position (diver, organiser, marshal etc)

Contact telephone number

Gas (Air, Nitrox 32, Nitrox 36 etc)

Date of last dive

SAA qualification

Other qualification*

Name of emergency contact

Telephone number

Diver Name

Position (diver, organiser, marshal etc)

Contact telephone number

Gas (Air, Nitrox 32, Nitrox 36 etc)

Date of last dive

SAA qualification

Other qualification*

Name of emergency contact

Telephone number

Diver Name

Position (diver, organiser, marshal etc)

Contact telephone number

Gas (Air, Nitrox 32, Nitrox 36 etc)

Date of last dive

SAA qualification

Other qualification*

Name of emergency contact

Telephone number

Diver Name

Position (diver, organiser, marshal etc)

Contact telephone number

Gas (Air, Nitrox 32, Nitrox 36 etc)

Date of last dive

SAA qualification

Other qualification*

Name of emergency contact

Telephone number

Diver Name

Position (diver, organiser, marshal etc)

Contact telephone number

Gas (Air, Nitrox 32, Nitrox 36 etc)

Date of last dive

SAA qualification

Other qualification*

Name of emergency contact

Telephone number

Diver Name	
Position (diver, organiser, marshal etc)	Contact telephone number
Gas (Air, Nitrox 32, Nitrox 36 etc)	Date of last dive
SAA qualification	Other qualification*
Name of emergency contact	Telephone number

Diver Name	
Position (diver, organiser, marshal etc)	Contact telephone number
Gas (Air, Nitrox 32, Nitrox 36 etc)	Date of last dive
SAA qualification	Other qualification*
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Gas (Air, Nitrox 32, Nitrox 36 etc)	Date of last dive
SAA qualification	Other qualification*
Name of emergency contact	Telephone number

DIVE SITE INFORMATION

PLANNED DIVE INFORMATION DIVE NUMBER 1

Date of dive: _____ Dive site name and location: _____

Planned maximum depth: _____

Will this dive include any decompression (other than a safety stop)? Yes No

If Yes, please provide full details here:

Nature of dive (wreck, reef, drift etc) _____

Will there be shore or boat cover (other than the boat skipper)? Yes No

Anticipated water temperature _____ Nature of entry (boat, shore etc) _____

Anticipated time of launch _____ Time of slack water on site _____

Anticipated visibility (good, fair, poor) _____

PLANNED DIVE INFORMATION DIVE NUMBER 2

Date of dive: _____ Dive site name and location: _____

Planned maximum depth: _____

Will this dive include any decompression (other than a safety stop)? Yes No

If Yes, please provide full details here:

Nature of dive (wreck, reef, drift etc) _____

Will there be shore or boat cover (other than the boat skipper)? Yes No

Anticipated water temperature _____ Nature of entry (boat, shore etc) _____

Anticipated time of launch _____ Time of slack water on site _____

Anticipated visibility (good, fair, poor) _____

PLANNED DIVE INFORMATION DIVE NUMBER 3

Date of dive: _____ Dive site name and location: _____

Planned maximum depth: _____

Will this dive include any decompression (other than a safety stop)? Yes No

If Yes, please provide full details here:

Nature of dive (wreck, reef, drift etc) _____

Will there be shore or boat cover (other than the boat skipper)? Yes No

Anticipated water temperature _____ Nature of entry (boat, shore etc) _____

Anticipated time of launch _____ Time of slack water on site _____

Anticipated visibility (good, fair, poor) _____

BOAT INFORMATION

Please complete the following section if you are planning a boat dive:

Rib Information (Only complete if using a CPA club rib)

Which boat are you planning to use? CPA1 (Humber) CPA2 (Tornado)

Name of Boat Handler

SAA Qualified handler? Yes No

Name of Radio Operator

SAA Qualified operator? Yes No

Name of Boat Tower

PLEASE ENSURE THAT YOU READ AND THOROUGHLY UNDERSTAND THE RIB SAFETY AND CHECKLIST APPROPRIATE FOR THE BOAT YOU ARE PLANNING TO USE.

Charter Boat Information (only complete if not using a CPA club rib)

Name of Charter _____

Contact telephone number _____

Type of boat _____

Does the boat carry an adequate O2 kit? Yes No

GENERAL INFORMATION

Please add any additional pertinent information you feel might be useful:

Approval of Dive Plans

The DO or their delegate shall inspect all dive plans and will provide their reaction prior to the dive taking place. Failure to submit an accurate dive plan to the DO or his/her delegate will result in your dive being outside of the remit of CPA and the SAA.

Any dive plans that in the DO's opinion are inadequate or inappropriate shall be rejected. At his/her discretion the DO may modify a dive plan to eliminate risks or reduce them to an acceptable level. The DO must provide written approval of your dive plan in writing or by email before you dive.

DIVE LOGS

All Dives carried out by Club members shall require a Dive Log to be returned to the DO for inspection and records. In the event that the Dive log reveals unsafe practices, the DO shall take the necessary steps to prevent a re-occurrence.

INCIDENT REPORTING

Any and all accidents or near misses, causing injury, property damage or not shall be reported to the DO so that he/she in turn can notify SAA head office.

CHECK LIST:

You must check the following as part of your personal and club dive plan, and report any issues or problems with compliance to the DO:

1. That the divers named on this form are competent to carry out the planned dive.
2. That everyone in the dive party is aware of and understands the dive plan
3. That proper records of the dive and a log and dive report are provided to the DO.
4. That the dive site is safe and that changing conditions have not rendered the dive plan unsafe
5. That all divers' equipment is appropriate and adequate for the planned dive, and has been thoroughly tested in accordance with dive industry guidelines.

SAFETY - DUTY OF CARE

Your responsibility includes care for all who are involved in and affected by any undertaking involved in our diving activities. An example might include bystanders watching a boat launch who must be protected from the consequences of any mishap.

By ticking this box, I am indicating that I fully understand and accept the rules and guidance of the SAA and Caversham Park Aquanauts. I also agree to abide by safe diving practices at all times, including the HSE Recreational Diving Projects Approved Code of Practice and SITA's Risk Assessment guidance. I will not deviate from the above dive plan without first discussing it with the DO, and resubmitting the dive plan. I understand that it is my responsibility to ensure that all divers in the group named above also abide by the rules and guidance of the SAA and Caversham Park Aquanauts.

Your name _____

Your SAA Member number _____

Your email address _____ Telephone number _____

What to do next...

Please call the DO, David Jerram, and discuss your plan on 07973 553159. You will need to pass this form to David by hand at the club on a Tuesday night, or by faxing it to 0118 972 4664. David will reply to discuss any areas that remain unclear - or to confirm any adjustments that need to be made. David will need provide written approval of the plan before your dive takes place.

If David is unreachable for any reason, you should approach the current Assistant DO, Alex Cooke by calling him on: 0118 942 8247 or mobile: 07980 260 998

Diving Officer Use only:

- This plan has been approved.
- This plan has been amended. Please see notes before diving
- This plan has been rejected. Please see notes, amend and resubmit before diving

Diving Officers Signature:

Diving Officer, CPA

Date:

