



BOATING WORK PLAN SUBMITTAL FORM
 Submit to the Diving and Small Boat Safety Officer (DBSO)

Date Submitted: _____

Project ID Number: _____ (not required)

Proposed Expedition Dates: _____ **through** _____

Vessel Name/Type: _____
 (Include a brief description of vessel type, length, propulsion, etc)

General Work Site Location(s): *(include lat/ long if applicable)* _____

Plan Submitted By: _____

Principal Investigator: _____ **Vessel Operator(s):** _____

Estimated No. of People Onboard: _____ (waivers needed for non-OSU personnel)

Work Proposed: _____

Tools/Equipment Used: _____

Any Hazardous Conditions Anticipated: (i.e. strong currents, restricted visibility, live boating of swimmers/snorkelers, over the side operations, sea state)

Hazard Mitigation Steps/Safety Precautions:

Roster (name, highest level of training, affiliation):

Boat Operator(s) *(ex: John Smith, MOTC, OSU Small Boat Program)*

1. _____
2. _____
3. _____
4. _____



Scientific Diving and Small Boat Program - Research Office

Oregon State University, A312 Kerr Administration Building, Corvallis, Oregon 97331-2140

Off 541-737-6893; Cell 541-740-4577; Fax 541-737-9041 email: kevin.buch@oregonstate.edu

Work Plan

(General description of the work, the equipment, the location, the vessel, crew composition and any other pertinent information.)

A large, empty rectangular box intended for the user to provide a general description of the work, equipment, location, vessel, crew composition, and any other pertinent information.



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General Work Plan Considerations

- Any vessel operator has the right to refuse to operate without fear of penalty if s/he feels the conditions are unsafe or unfavorable **OR** the operation violates the precepts of their training **OR** violates the regulations of the OSU/SBSA Boating Safety Manual.
- All persons onboard shall wear an appropriate PFD
- It is the responsibility of each operator to terminate the cruise, without fear of penalty, whenever s/he feels it is unsafe to continue the operation, unless it compromises the safety of another crew member.
- Vessel Operators must be on file with OSU Boating Safety Office
- All work plans **MUST** be based on the competency of the least experienced crew member.
- All operators- in-training must be accompanied by an authorized operator.
- Pre-launch vessel inspection and crew briefing for each outing
- For all boating conducted under hazardous conditions a plan must be formulated to deal with such conditions.
- An OSU Designated Shore Contact must be identified and a Float Plan **MUST** be completed for each proposed outing. (copy forms as needed)
- An Emergency Plan **MUST** be completed for each expedition including the following: emergency contact information (including name, relation and telephone number) for each person onboard, nearest US Coast Guard or marine response station, nearest accessible hospital and anticipated means of transportation.

BOATING EMERGENCY MANAGEMENT PROCEDURES

General Procedures

Depending on and according to the nature of the emergency, secure the vessel, stabilize the patient, contact local Emergency Medical System (EMS) for transport to medical facility, and notify OSU DBSO. Explain the circumstances of the incident to the evacuation teams, medics and physicians

1. **Make appropriate contact with victim or rescue as required.**
2. **Establish (A)irway, (B)reathing, (C)irculation as required.**
3. **Call local Emergency Medical System (EMS) for transport to nearest medical treatment facility.**
4. **Notify DBSO or designee.**
5. **Complete and submit Incident Report Form to the DBSO of OSU.**

Nearest Coast Guard Station or other on-water Emergency Response to Work Site (with contact info):

Nearest Medical Treatment Facility to Work Site (with contact info):

List Emergency Procedures Appropriate for Work Location and Platform: